## OMP ETED APPLICATION, TAX ld County Planning and Zoning Depart. FO Box 58 Washburn, WI 54891 (715) 373-6138

## **APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

APR 18 2022

Bayfield Co.
Planning and Zoning Agency

Permit #:	22-0201	ENT
Date:		-
Amount Paid:	#75-5-20-0 Acc Bldg F	72
Other:		
Refund:		

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CO	NSTRUCTION	UNTIL A	ALL PERMITS I	HAVE BEEN ISSUED TO A	APPLICANT.	Origin	al App	lication <u>N</u>	<u>//UST</u> be	submi	tted	ILL OUT IN	INK ( <mark>NO</mark>	PENCIL)
TYPE OF PERMIT R	EQUESTED	+	□ LAND	The second secon	The second secon		ONDIT	IONAL US		PECIAL	USE 🗆	THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAM	OTHER_	
Owner's Name:	En	m!	// T	Mailing	Address:		<i></i>	C C	ity/State/	Zip:		5487.	3 Telepho	one: 715 -2858
BAIE B L Address of Property					7 <i>5 5</i> /State/Zip:								795	-9828
29-75	500717	15	HORE	RD B	ARNI	E5	WI	5.	542	873	3		Cell Pho	one:
Email: (print clearl	y)								-					
Contractor:	F) 1	_			tor Phone:		Plumb	er:					Plumbe	r Phone:
Authorized Access	ELF			SA	ME									
Authorized Agent: Owner(s))	(Person Signing	g Applica 12	ntion on behalf	of Agent Pl	none:	-	Agent	Mailing Ad	<b>Idress</b> (inc	lude City	//State/Zip	):		Authorization
PROJECT	7 0	_/\	Jubu	( <u>Tax</u>	ID#		-				Recorde	ed Document		ed (for Agent)
LOCATION	gal Descrip	tion:	(Use Tax Stat	ement)	223	5						8	8	23 mp/
NE 1/4, 36	- 1/0	Gov'	't Lot	Lot(s) CSM V		CSM Do	oc#	Lot(s)	# В	lock #	Subdivi	sion:		
1/4, 10	_ 1/4			2 124					N					
Section $20$	, Township	4	4 N, Rang		Town of:	3 1	A III	EC	-	717	Lot Size		Acre	age ,
							10,	12 3			2 CS	m 124	1 5	. /
			nd within 3 ard side of F	00 feet of River, Stre			Dist	ance Stru	cture is f	rom Sho		1 61	Property odplain	Are Wetlands
☐ Shoreland —	The state of the s			The state of the s	escontinue	_					feet		ne?	Present?
	□ is Prope	erty/La	na within 1	000 feet of Lake, Por	id or Flowage escontinue	<b>→</b>	Dist	ance Stru	cture is f	rom Sho	reline : feet		Yes	□ Yes <b>⊘</b> No
Non-	199	_							183			€	No	
Shoreland											-	-		
Value at Time	A Property	Park III		THE RESIDENCE OF			AN Z			Trust a D			S., 081 = 91.11.11	
of Completion				Project	Project		10 mg	otal # of		Carre		Type of	(-)	Type of
* include donated time	F	Project	t	# of Stories	Foundation	DOM: NO	De	on				ary System		Water
& material				THE STATE OF			p	roperty	1.0			ne propert		property
144	New C	onstru								/City			☐ City	
- 10-1	☐ Addition	on/Alt	eration	☐ 1-Story +	☐ Foundat	ion		2	□ (Ne	ew) Sar	nitary Specify Type:			₩ Weli
\$ 1		,		Loft	_ Toundat									- wwell
19,000	☐ Conve	Conversion    2-Story   Slab  Sanitary (Exist							xists) Specify Type:					
	☐ Reloca	te (exis	sting bldg)				-	-	□ Pri	vv (Pit)		Vaulted (m	in 200 gallo	
	☐ Run a l				Use		5000	None				contract)	III 200 gaile	
1	Proper	ty	H		Year Rou	und			☐ Co	mpost	Toilet			
							1. 1.		☐ No	ne		_		
<b>Existing Structu</b>	re: (if additi	ion, alte	eration or bu	siness is being applied	for) Lengt	h:			Width:			He	eight:	
Proposed Cons	truction:	(overa	II dimension	is)	Lengt	h:	30		Width:	11	/ /			10'
		7,000		ersees Suniversity			lus-uieli	districts	Similar California	STATE	STATE SERVE	AND A PROPERTY	ovinimina in	
Proposed U	Jse	1			Proposed	Struct	ure					Dimensio	ns	Square Footage
			Principal	Structure (first str	ructure on pro	operty	•)				(	Х	)	Tootage
			Residenc	e (i.e. cabin, huntir	ng shack, etc.	)					(	Х	)	
¥ Residentia	l Use			with Loft					1		(	Х	)	
	A		_	with a Porch							(	Х	)	
7-5	- 13		-	with (2 <sup>nd</sup> ) Porch with a Deck		- 1	100				(	X	)	
				with (2 <sup>nd</sup> ) Deck			100	10.1			(	X	)	
☐ Commerci	al Use			with Attached							(	X	)	
			Bunkhou	se w/ (□ sanitary, o		uarter	s or $\square$	cooking 9.	food pro	n facili+:	05) (	X	1	
-				ome (manufactured		aui (Cl	o, <u>or</u> $\Box$	COURING &	. loou pre	p raciliti	(	X	)	
☐ Municipal	Use			/Alteration (explain		-					- (	X	)	
_ Municipal	536	V		y Building (explain)		as of	-			377	- (	1/ x 3	20)	330
				y Building Addition							1	X	)	300
				se: (explain)							- ·	X	1	
				nal Use: (explain)			1 175		-		- 1	X	)	
200			Other: (ex					- 3	N A	62 s 18	- L	X	1	
40.3.6		- 1			TARTING CONCERN	LICTION	MARTIN	IT A DEDAKT	TANL	UTING	TALAL TURE	No.		
I (we) declare that this	application (inc	cluding ar	ny accompanyin	OBTAIN A PERMIT <u>or</u> ST g information) has been exa	mined by me (us) a	nd to the	best of my	(our) knowle	edge and bel	ef it is true	correct and	complete. I (w	e) acknowledge	e that I (we) am
(are) responsible for the	ne detail and ac	curacy of	all information	I (we) am (are) providing an (are) providing in or with t	d that it will be relie	d upon b	v Bavfield	County in det	termining wh	ether to is	sue a nermit	1 (we) further	accent liability	which may be a
property at any reason	nable time for th	ne purpos	se of inspection.			1						1 1 2		
Owner(s):	tinle Owner		on the bood	All Owners must sign	Brie			A CONTRACTOR	1000	and the second		Date	-/3	2022
(ii there are iviu	upie Owners	insted	on the peed	owners must sign	or letter(s) of au	unoriza	won mus	st accompa	inv this ap	olication	1 20 "	A SHARE THE REAL PROPERTY.		

Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

54873
Turn Own

Common ownership - Leey Settack

Address to send permit 2975 SOUTH SHORE RD

(See Note below)
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Authorized Agent: \_

# APPLICANT - PLEASE COMPLETE PLOT

Douglas J. Brierly 2975 S. Shore Rd. Solon Springs, WI 54873

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

(2)Show / Indicate: North (N) on Plot Plan (3)Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road) (4)Show:

**Proposed Construction** 

All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond Show any (\*):

(\*) Wetlands; or (\*) Slopes over 20%

(7)BOILDING EPTIC DARIN SEPTIC HOUSE PLUMBING NORTH HWELL AD

Please complete (1) - (7) above (prior to continuing)

(1)

(5)

(6)

Show:

Show Location of:

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements			Description	Setback Measurements		
		-					
Setback from the Centerline of Platted Road	345	Feet		Setback from the Lake (ordinary high-water mark)	Feet		
Setback from the Established Right-of-Way		Feet		Setback from the River, Stream, Creek	Feet		
				Setback from the Bank or Bluff	Feet		
Setback from the <b>North</b> Lot Line	320	Feet					
Setback from the <b>South</b> Lot Line	570	Feet		Setback from Wetland	Feet		
Setback from the West Lot Line	/30	Feet		20% Slope Area on the property			
Setback from the <b>East</b> Lot Line	250	Feet		Elevation of Floodplain	Feet		
Setback to Septic Tank or Holding Tank	80	Feet		Setback to Well	64 Feet		
Setback to Drain Field	42	Feet			1.0		
Setback to Privy (Portable, Composting)		Feet					

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible fro one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

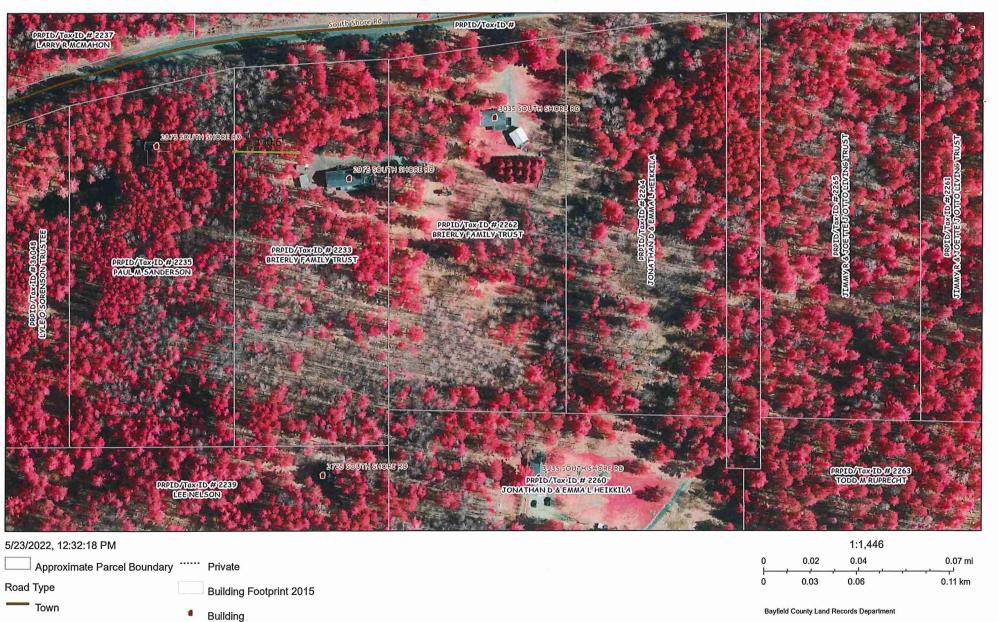
The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	7-219	# of bedrooms:	Sanitary Date: //-7-7			
Permit Denied (Date):	Reason for Denial:	Linden interior					
Permit #:	Permit Date:	DATE AND A					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Record  Yes (Fused/Contigu	ous Lot(s)) No	Mitigation Required Mitigation Attached	Affidavit Required ☐ Yes ☐ No ☐ Yes ☑ No				
Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:							
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No □ Yes □ No		Were Property Lines Represented by Owner  Was Property Surveyed  Yes  No No					
Inspection Record: Landounce was on	9.4e		and the second second	Zoning District ( R-2)			
	divisites et alfabrica	Lakes Classification ( )					
Date of Inspection: 5/25/22	Inspected by:	Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Attached Build as profosion for Human of Press and Signature of Inspector:	thed?   Yes   No-(If Med)		ructure g	Pate of Approval:			
Jane Strategy Strateg				Pare of Approval 5/26/27			
Hold For Sanitary:  Hold For TBA:	Hold For Fees: 🗌	_ 0					

# Bayfield County, WI



1 (1) - 1

Cal Estate Daylicia County Flobelty Listing 'oday's Date: 5/23/2022

Created On: 3/15/2006 1:14:47 PM

Description • Tax ID:

Updated: 2/18/2010

PIN:

2233

04-004-2-44-09-20-4 01-000-70000

Legacy PIN: Map ID:

004113007000

1unicipality:

(004) TOWN OF BARNES

TR: Description:

S20 T44N R09W LOT 2 CSM #124 IN V.2 P.162 (LOCATED

IN NE SE) IN V.928 P.693 729A (THE BRIERLY FAMILY TRUST) IM 2005R-502157 IM 2005R-500953

Recorded Acres: Calculated Acres: 5.108 5.108

.ottery Claims:

1 First Dollar: Yes 'oning: (R-2) Residential-2

104

ESN:

Tax Districts

Updated: 3/15/2006 STATE 14 COUNTY 104 TOWN OF BARNES

141491 @1700

Recorded Documents

Updated: 3/15/2006

CONVERSION

Date Recorded:

502157 438-335;924-122;928-

SCHL-DRUMMOND

TECHNICAL COLLEGE

🤐 Ownership

Updated: 2/18/2010

. roperty outdoor current

**BRIERLY FAMILY TRUST** 

BARNES WI

**Billing Address: BRIERLY FAMILY TRUST** 

2975 SOUTH SHORE RD BARNES WI 54873

Mailing Address: **BRIERLY FAMILY TRUST** 2975 SOUTH SHORE RD

BARNES WI 54873

Fite Address \* indicates Private Road

2975 SOUTH SHORE RD **BARNES 54873** 

Property Assessment Updated: 10/4/2016 2022 Assessment Detail Code Acres Land Imp. **G1-RESIDENTIAL** 5.110 26,700 88,200 2-Year Comparison 2021 2022 Change 26,700 26,700 0.0% 88,200 Improved: 88,200 0.0% Total: 114,900 114,900 0.0%



Property History



# Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No. 22	<b>2-0201</b> Issue	ed To: BRIERLY FA	AMILY TRUST		
LOT 2 CS	SM #124 IN V.2 P.16	2 (LOCATED IN NI	E SE) IN V.928 P.693 729	Α	
Location:	1⁄4 of	1/4 Section	<b>20</b> Township <b>44</b> N.	Range	<b>9</b> W.Town of <b>barnes</b>
		,			
Gov't Lot	Lot	Block	Subdivision		CSM#

Residential Structure in R-2 zoning district

completed or if any prohibitory conditions are violated.

For: Accessory: [1-Story]; garage (11' x 30') = 330 sq. ft.] Height of 10'

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not for Human Habitation or Sleeping Purposes. If Pressurized water enters structure a sanitary permit is required prior. Must meet and maintain setbacks including eaves and overhangs.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE:	This permit expires one year from date of issuance if the authorized construction	Tracy Pooler, AZA		
	work or land use has not begun.	Authorized Issuing Official		
	Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.	8-22-2022		
	This permit may be void or revoked if any performance conditions are not	Date		

## SUBMIT: COMPLETED APPLICATION, TAX TATEMENT AND FEE TO: **Bayrield County**

Planning and Zoning Depart. Washburn, WI 54891 (715) 373-6138

#### APPLICATION FOR PERMIT **BAYFIELD COUNTY, WISCONSIN**

# Date Stamp (Received)

JUL 18 2022

Bayfield Co.

Permit #: Date: 53940 8-4-Amount Paid: Impair Other:

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

TYPE OF PERMIT				D USE	SANIT				ONAL US	E SPE	CIAL US	14414	.O.A. 🗆 01	THER	r LIVCIL)
Owner's Name:	ALQUESTE			1	Maili	ng Address:				ity/State/Zi	p: ,		1	Telepho	me:
Address of Proper	e +0,	gwn.	MENAT	Join!	17	27/0 5 ity/State/Zip:	41501	OR	ر ــــ	EAU	0/9/	ine l	1242	7/5-	0538
5445 5	TAME	5 1	294	17	10	BAR	nes	WI	39	5/5		37	10)	Cell Pho	559-
Email: (print clea	rly) 54	P23	4 Q (	esta	My	link.n	eT		100					7	504
Contractor: Per	erson	V C	onst			actor Phone:	-	Plumbe	ton	Plyn	Bia	4			r Phone:
Authorized Agent: Owner(s))	•	ning Applic	ation on behal	f of		t Phone:	28	Agent N	Mailing Ac	dress (inclu	de City/S	ate/Zip):	ward		Authorization ed (for Agent)
GRU	y pe	12.				ax ID#	0	11)1/	110 0	10. CP	- 70	Recorded	Document: (She		
PROJECT LOCATION	Legal Desci	ription:	(Use Tax Sta	tement)		38636					111	2021	<u> </u>	590	273
1/4,	1/4	Gov	't Lot	Lot(s)	CSM	Vol & Page	CSM Do	c#	Lot(s)	# Bloo	ck # !	Subdivisio	n:		
Section 50	ر Townsl	hip <u>4</u>	N, Ran	ge <b>K 00</b>	<u>L</u> w	Town of	BA	ene	5	A 3'1		Lot Size		Acre	age /00
	□ Io Duo		and within 1	200 foot of	Divor C	tream (incl. Intern				cture is fro	m Shoro	lino :	Is your Prop		
			ard side of			f yescontinue		Dista	ince Stru	cture is iro	111 311016	feet	in Floodpla		Are Wetlands Present?
☐ Shoreland	ls Pro	perty/La	nd within 1	L000 feet o	f Lake, P	ond or Flowage	e	Dista	nce Stru	ture is fro	m Shore	line :	Zone?		☐ Yes
100	The same				, l	f yescontinue	<b>e</b> → ′		130			feet	≯ No		<b>№No</b>
☐ Non- Shoreland															
						Lin Till and					- N				
Value at Time of Completion									al # of			What Ty			Type of
* include		Projec	t		ject stories	Proje Founda		bec	lrooms				y System(s)		Water
donated time				# 01 3	tories	Founda	LION	pro	on				property?		on property
& material	<b>₩</b> New	Constr	uction	X. 1-St	orv	<b>№</b> Basem	ent			☐ Mun	icipal/C				☐ City
1000	Addition/Alteration 1-Sto				ory +	'   Foundation     2			(Nev		ary Spe	cify Type:	-ic	XWell	
\$ 1,7001	□ Conv	version		□ 2-St	1=	□ Slab			3			xists) Specify Type:			
			sting bldg)						U	☐ Privo	/ (Di+)	or 🗆 Va	ulted (min 20	Ollen Of	<u>-</u>
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Proposed Cons					ing appii		gth: gth:	113		Width:	5	4	Height		3/
A MARKANIA AND AND AND AND AND AND AND AND AND AN			STREET, STREET					117		Marie Control					
- Proposed	Use	1				Propose	d Structi	ıre				C	imensions		Square Footage
			Principa	Structur	e (first	structure on p	property			*		16	1 x34	) 6	2112
1-			Residen			ting shack, et	:c.)					(	X	)	
Residenti	al Use	· ·	n 7 lu	with I		1 tel				Th.		(	X	)	200
1				with a Porch							(/8	8 x /4 10 x /6	)	150	
16.4			- 5	with (2 <sup>nd</sup> ) Porch with a Deck							14	7 x 10	)	1120	
					2 <sup>nd</sup> ) De	ck		1.1	7			1	X	)	710
□ Commerc	ial Use					d Garage		,				( 4	52× 32	)	16/04
*			Bunkhoi			, <u>or</u> $\square$ sleeping	gauarters	or $\square$ o	ooking &	food prep f	acilities)	1	X	)	. +4/
						ed date)	J 4.30. ters	2				1	X	)	
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☐ Municipa	ruse			y Buildin								(	Х	)	
						ion/Alteration	n (explair	n) _				(	Х	)	- Z. Z.
		П		Jse: (expla						unb		1	Х	)	

Conditional Use: (explain)

Other: (explain)

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described

property at any reasonable time fo	r the purpose of inspection.				The second second
Owner(s):				\$	Date
(If there are Multiple Own	erglisted on the Beed All	Owners must sign or letter	s) of authorization must accomp	any this application)	Felt New Word 1
Authorized Agent:	May per			(See Note below)	Date
(If you are signi	ng on behalf of the o	wner(s) <u>a letter of autl</u>	horization must accompany	this application)	
W. S. 100	1/29711	1010,0	d. HAVINATO	11/154842	Attach
Address to send permit _	1131110	CO. CRIP	O HAYDING		Copy of Tax Statement d the property send your Recorded Deed
			/	in you receitly purchase	a the property send your necoraca beed

# In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Show Location of: (1)(2)Show / Indicate:

**Proposed Construction** 

RECEIVED

Fill Out in Ink - NO PENCIL

(3)Show Location of (\*):

North (N) on Plot Plan

(4)Show: (5)

(\*) Driveway and (\*) Frontage Road (Name Frontage Road) All Existing Structures on your Property

Show: (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

Show any (\*): Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(\*) Wetlands; or (\*) Slopes over 20%

See Att Act steats

Sanitary Permitt submitted

By Doug Berger

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements	Description	Setback Measurements
			111/
Setback from the Centerline of Platted Road	Feet	Setback from the Lake (ordinary high-water mark)	195 Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	57, Feet		
Setback from the <b>South</b> Lot Line	8/ Feet	Setback from Wetland	Feet
Setback from the West Lot Line	145) Feet	20% Slope Area on the property	☐ Yes ☐ No
Setback from the <b>East</b> Lot Line	49 Feet	Elevation of Floodplain	Feet
			1 11
Setback to Septic Tank or Holding Tank	/S Feet	Setback to Well	// QW WY/. Feet
Setback to Drain Field New	30 Feet		
Setback to Privy (Portable, Composting)	Feet		

nent or construction of a structure within ten (10) feet of the n m required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

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(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

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If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	2-9/5	# of bedrooms:	Sanitary Date: 8/1/22		
Permit Denied (Date):	Reason for Denial:		od Classic			
Permit #:	Permit Date:	Control of	realizate rake			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Recor	ious Lot(s))	Affidavit Required Affidavit Attached Yes No				
Granted by Variance (B.O.A.)  ☐ Yes ✓ No Case #:		Previously Granted by	/ Variance (B.O.A.) Case	#:		
Was Parcel Legally Created Was Proposed Building Site Delineated Wes ONO		Were Property Lines Represented by Owner  Was Property Surveyed  Wes				
Inspection Record: GYANED - Old House	to be Renoved			Zoning District ( R-/ )		
		00	Lakes Classification ( )			
Date of Inspection: 8/9/27	Inspected by:	Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Atta		lo they need to be atta	ched.)	Shared are a tree of the same		
- Build as proposed						
- Build as proposed - Get Required UDC inspections						
Signature of Inspector:			BOALD LOWWARD HAVE IN	Date of Approval: 8/12/2		
Hold For Sanitary:   Hold For TBA:	Hold For Affid	avit: 🗆	Hold For Fees:			

# Bayfield County, WI



https://maps.bayfieldcounty.wi.gov/ZoningWAB/

\$100

# Bayfield County Impervious Surface Calculations

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

ARD JOINT IRGE!	
Property Address	
3445 SHIPES HOUR BARDES WI	
Section, Township, Range	
Sec 50Z Township T49 N, Range 19	V
Gov't Lot Lot # CSM# Vol & Page	
4 2 2194 V.12 P.418	7
Town of:	
BARNES	
Tax ID# Date:	
700 38 636 July 6-22	
	Sec <u>502</u> Township <u>T49</u> N, Range <u>R9</u> N Gov't Lot Lot # CSM# Vol & Page V./2 P.4/8  Town of:  BARNES

**Impervious Surface:** An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious.

**Calculation of Impervious Surface:** Percentage of impervious surface shall be calculated by dividing the surface area of existing and proposed impervious surfaces on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark by the total surface area of the lot or parcel, multiplied by 100.

**Impervious Surface Standard:** Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

**Existing Impervious Surfaces:** For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:

- a. Maintenance and repair of all impervious surfaces:
- b. Replacement of existing impervious surfaces with similar surfaces within the existing building footprint;
- c. Relocation or modification of existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance, and meets the applicable setback requirements in Section 13-1-32.

Impervious	Surface	Itam
iiiibei vious	Surface	nem

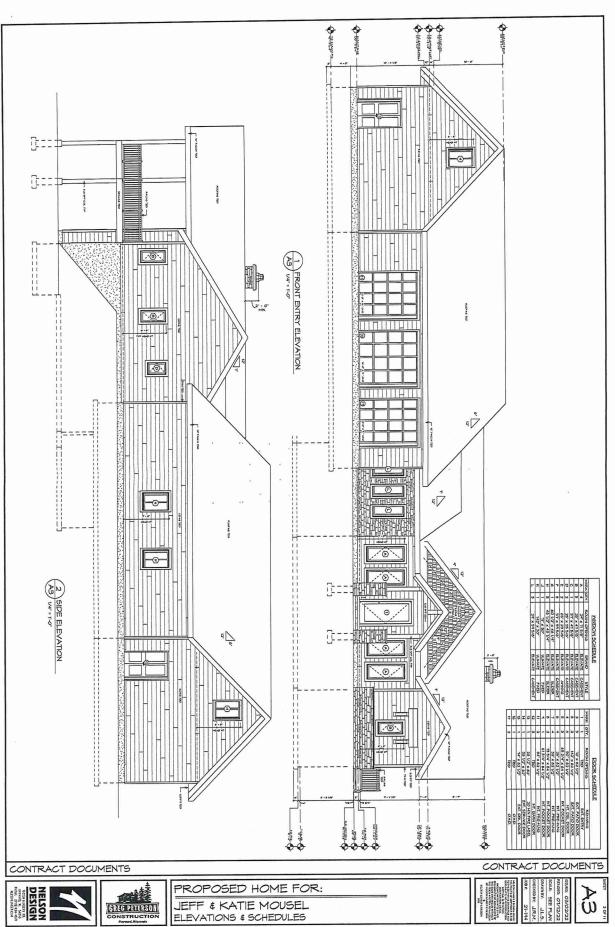
Dimension

Area (Square Footage)

Existing House	TO	Be	Removed			
Existing Accessory Building/Garage	conci	nete	Removed moved			
Existing Sidewalk(s), Patio(s) & Deck(s)		100				
Existing Covered Porch(es), Driveway & Other Structures	BAT					
Proposed Addition/House	101X34			2/12	ς	
Proposed Accessory Building/Garage  AllACHE	52 X30	2	į	1/0/0	4	
Proposed Sidewalk(s) & Patio(s)	1814			25	2	
Proposed Covered Porch(es) & Deck(s)	18×16	47	X/0	87	7	
Proposed Driveway	GRAVE	el x	20	ó	000	
Proposed Other Structures						
				,		
Total:				5.	1050	
a. Total square footage of lot: _	91,	44%	2,9			
b. Total impervious surface area	: 50	50	,			
c. Percentage of impervious sur	face area:	100 x	(b)/a =	.52		
If the proposed impervious su	rface area is (	greater t	than 15% mitiga	tion is requi	red.	
Total square footage of additional imp	pervious surfa	ce allov	ved: @ 15	%	@ 30%	
Issuance Information (County Use Only)  Date of Inspection: 8/9/a						
Inspection Record:					Zoning Piving:	
Condition(s):					Labes Calastics for	
condition(s):					Stormwater Management Plan Required:	
					☐ Yes ☐ No	
~ 1 1						
Signature of Inspector:					Date of Approval: 8/12/27	

u/forms/impervioussurface Created: May 2012 (®Apr 2016; Sept 2020)

Proofed by: \_\_





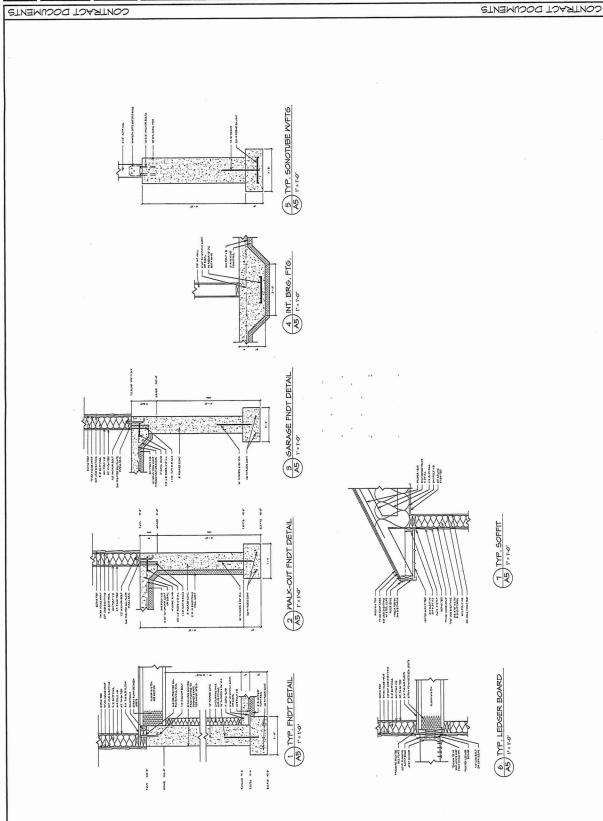


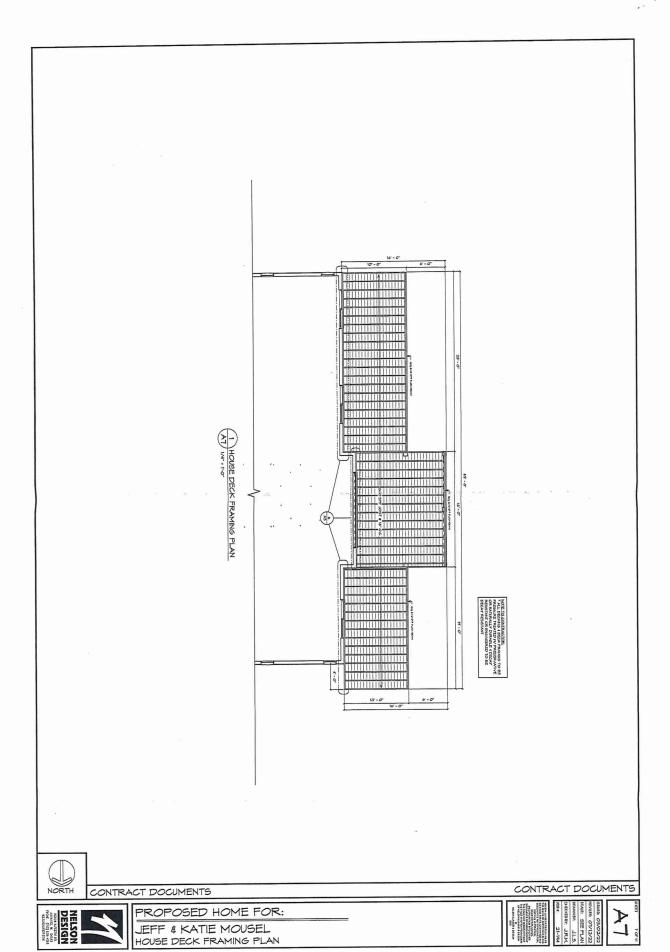


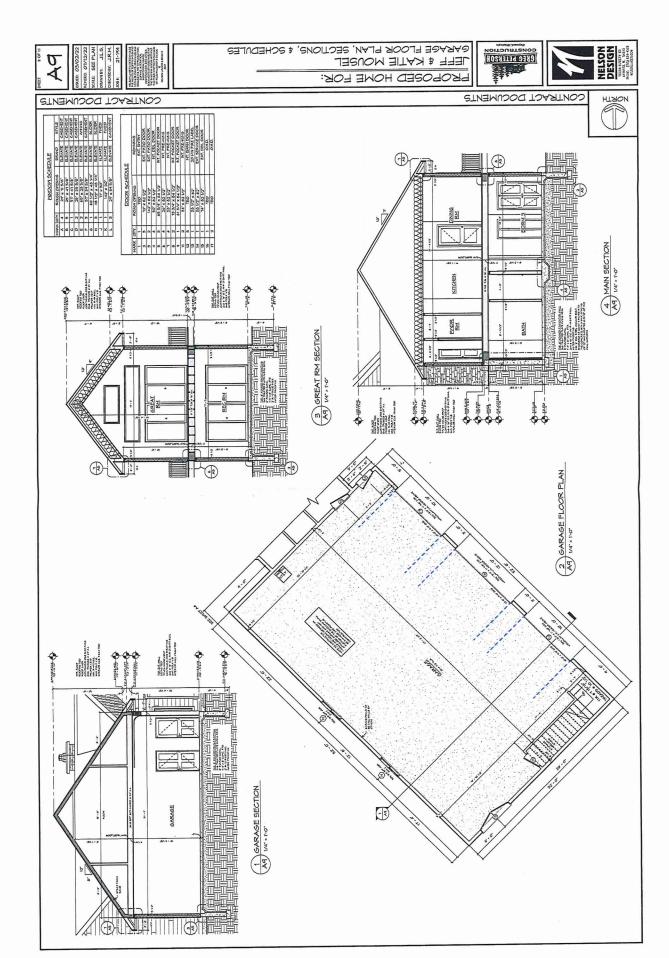


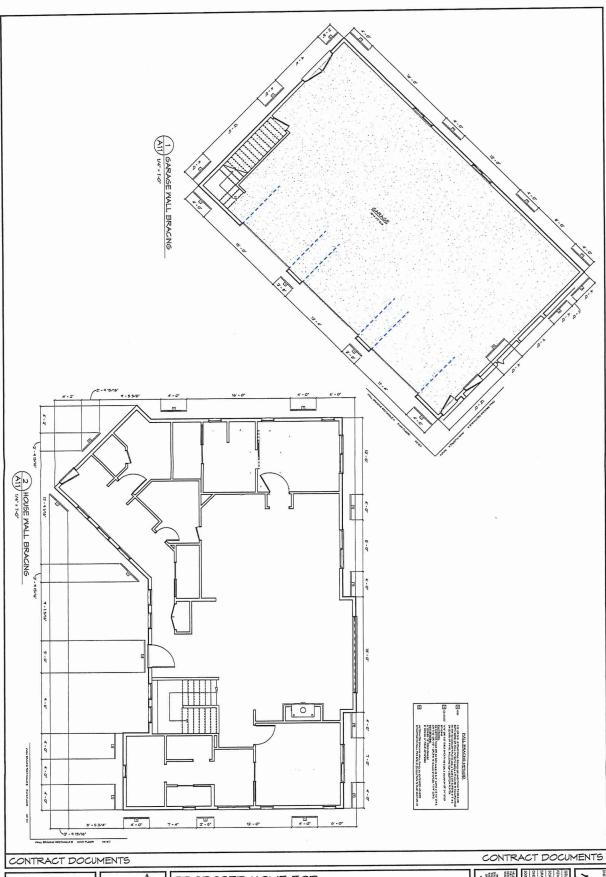














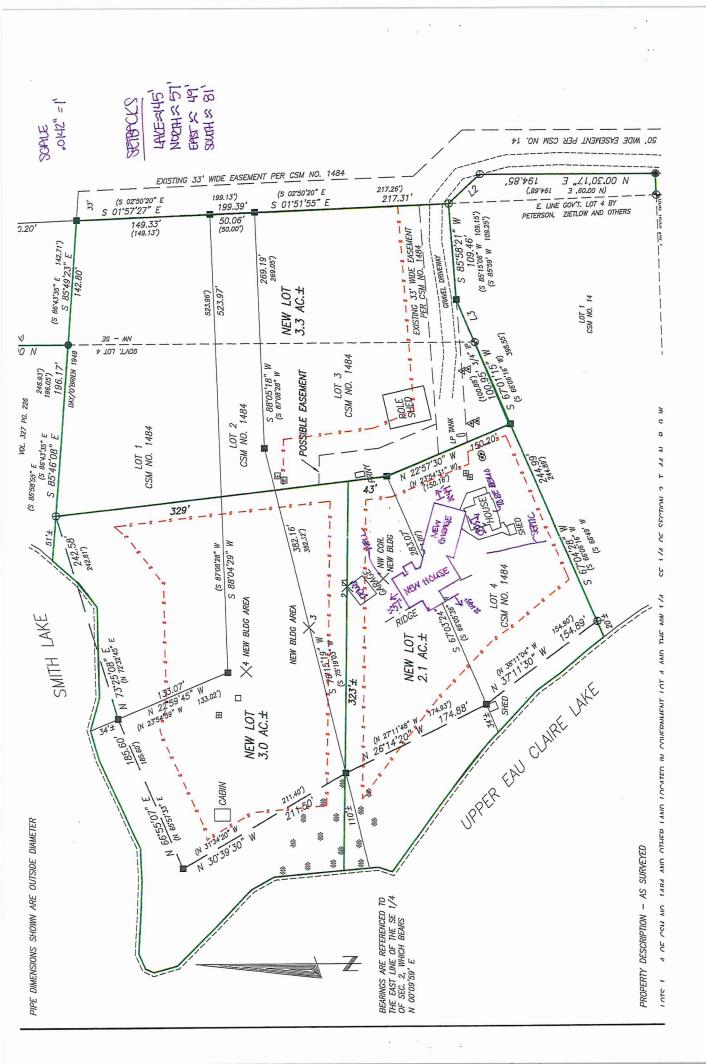


PROPOSED HOME FOR: JEFF & KATIE MOUSEL WALL BRACING PLANS









I authorize Greg Peterson to acquire all building permits pertaining to the building project located at

5445 James RD.
Solon Springs, WI 54873
in Bayfield County

Lawrence and Dawn Menard Joint Trust

Dawn Menard

Trustee 07/11/2022

Dawn Menard

2710 Sunset DR. Eau Claire, WI 54703

Cell 715-559-7504

phone 715-832-0538

## Real Estate Bayfield County Property Listing

**Today's Date:** 8/8/2022

Date Recorded: 9/25/2006

**Property Status: Current** 

Updated: 10/20/2021

EAU CLAIRE WI

Tax ID

34471

34472

34473

34474

Created On: 10/20/2021 11:36:03 AM

Description	Updated: 10/20/2021
Tax ID:	38636
PIN:	04-004-2-44-09-02-3 05-004-01700
Legacy PIN:	
Map ID:	
Municipality:	(004) TOWN OF BARNES
STR:	S02 T44N R09W
Description:	LOT 2 CSM #2194 IN V.12 P.418
	(LOCATED IN GOVT LOT 4 & NW SE)
Recorded Acres:	2.100
Calculated Acres:	2.100
Lottery Claims:	0
First Dollar:	Yes
ESN:	104

Tax Districts	Updated: 10/20/2021
1	STATE
04	COUNTY
004	TOWN OF BARNES
041491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE
Recorded Documents	Updated: 4/16/2007
CERTIFIED SURVEY MAP Date Recorded: 9/17/2021	2021R-590973 12-418
<b>₩ARRANTY DEED</b> Date Recorded: 6/26/2020	2020R-582859
■ WARRANTY DEED  Date Recorded: 2/27/2014	2014R-553447 1121-906
■ CERTIFIED SURVEY MAP	

	Billing Address: LAWRENCE & DAWN MENARD JOINT TRUST 2710 SUNSET DR EAU CLAIRE WI 54703	JOINT TO 2710 SUN	ICE & DAWN RUST	MENARD
	Fite Address * indicates Pr	ivate Roac	I	
	5445 JAMES RD		BAR	NES 54873
	Property Assessment		Updated:	3/25/2022
	2022 Assessment Detail			
_	Code	Acres	Land	Imp.
,	G1-RESIDENTIAL	2.100	303,300	136,600
5	2-Year Comparison	2021	2022	Change
)	Land:	0	303,300	100.0%
:	Improved:	0	136,600	100.0%
	Total:	0	439,900	100.0%
7				
3	Property History			

Ownership

**Parent Properties** 

04-004-2-44-09-02-3 05-004-01100

04-004-2-44-09-02-3 05-004-01200

04-004-2-44-09-02-3 05-004-01300

04-004-2-44-09-02-3 05-004-01400

TRUST

**LAWRENCE & DAWN MENARD JOINT** 

HISTORY E Expand All History	White=Current Parcels	Pink=Retired Parcels
Tax ID: 1239 Pin: 04-004-2-44-	-09-02-3 05-004-01000 Leg	. Pin: 004104409000
Tax ID: 34474 Pin: 04-004-	-2-44-09-02-3 05-004-01400	
Tax ID: 1239 Pin: 04-004-2-44-	-09-02-3 05-004-01000 Leg	. Pin: 004104409000
Tax ID: 34473 Pin: 04-004-	-2-44-09-02-3 05-004-01300	<u>)</u>
Tax ID: 1239 Pin: 04-004-2-44-	-09-02-3 05-004-01000 Leg	. Pin: 004104409000
Tax ID: 34472 Pin: 04-004-	-2-44-09-02-3 05-004-01200	<u>)</u>
Tax ID: 1239 Pin: 04-004-2-44-	-09-02-3 05-004-01000 Leg	. Pin: 004104409000
<b>Tax ID:</b> 34471 Pin: 04-004-	-2-44-09-02-3 05-004-01100	)
38636 This Parcel	<b>Parents</b>	♣ Children

2006R-509398 9-37

# Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - 22-0200 SANITARY - 22-91S SIGN -SPECIAL -CONDITIONAL -BOA -

22 0200

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

INO.	22-0200	issued 10.	LAVVR	ENCEGL	JAVVIN	MENARD	JOINI	IRU	31		
Locatio		#2194 IN V.12 of nes	•	CATED II Section	N GOV 2	T LOT 4 & Township	NW S 44	•	Range	9	W.
Gov't Lo	t Lo	ot	Block	Sı	ubdivisio	n			CSM#		
For: F  Condit	Inspecti setback sible for complying with state and fed	Story w/walko submitted. A on Agency r s including e	Out baseme  A Uniform E  nust be obte eaves & ove	Dwelling tained pr	Code ( ior to s appro	UDC) Perithe start of oved.	mit fro	m th	e locally tion. Me	contra	cted UDC I maintain
nodification of	construction that violates the law or o	other penalties or costs. For n	nore information, visit the o	department of natur	al resources we	tlands identification we	eb page or cont	act a depar	tment of natural res	ources service o	center (715) 685-2900.
NOIL.	This permit expires or work or land use has a		or issuance if the	authorized (	Construction	)II -	Tracy Pooler				
Changes in plans or specifications sha This permit may be void or revoked if							Authorized Issuing Official				fficial
*.	to have been misrepre				on is ioun	u		8-	22-2022		
ě e	This permit may be vo			onditions are	e not	-			Date		

LAMPENCE 9 DAMNI MENIADD IQUIT TOUCT

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Authorized Agent:

Address to send permit

#### **APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN**

# Pate Stamp (Received)

JUL 08 2022

Bayfield Co.

Permit #:	22-0/87/8
Date:	8-22-32
Amount Paid:	\$ 105 8-4-22 Res Accyblog 316
Other:	1-5)
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made p				0.5		PM TO APPL	icant.	Origin	nal	Application	MUST I	oe submi	tted FII	L OUT IN II	NK (NO	PENCIL)
TYPE OF PERMIT R	EQUESTE	D +>	☐ LANI	O USE	SANI	TARY	□ PRIV						1000		•	
Owner's Name:			Mailing Address:									OTHER _ Telepho	ne:			
Address of Property 5610  Email: (print clear)	ENDA	AI	DERSO	2		120	0 20 te/Zip:	or:	5+		BALD	WIN	WIS.	54002		
Address of Property	y: 														Cell Pho	ne:
Email: (print clear)	lv)	LK	d.			BAR	NES	WIS	5 /	548	73					760-0616
	**		•							6.9				9	775	160-0616
Contractor:	-				Cont	tractor I	hone:		PI	umber:	4				Plumber	Phone:
Authorized Agent:		ing Applic	ation on behal	f of	Ager	nt Phon	a:	1 14	Δ	gent Mailing A	\ddrace (i	ncludo City	/S+a+a /7:a)			
Owner(s))	. 11.00	•	0,00000 0000000000000000000000000000000		1.80.	\			1	Sent Maning A	ruui ess (i	riciade City	/State/Zip):	*		Authorization ed (for Agent)
PROJECT						Tax ID#				1			Recorded	Document: (	II	
LOCATION	egal Descr	iption:	(Use Tax Sta	tement)			27	29					-63	8	-91	18
NW 1/4, NE	1/4	Gov	/'t Lot	Lot(s)	CSM	Vol	& Page	CSM D	oc#	Lot(s	) #	Block #	Subdivisi	on:		
1/4, 100	_ 1/4					832	-918				- 64					'
Section 23	, Townsh	nip <b>4</b> 3	5 N, Ran	ge 09	w	W.	Town of			4			Lot Size		Acrea	ige
					1-1-1		BA	RNE	5							
			and within 3							Distance Str	ucture is	from Sho	reline :	Is your Pro		Are Wetlands
☐ Shoreland	_		ard side of				-continue		4				feet	in Flood Zone		Present?
	Is Pro	perty/La	and within 1	.000 feet						Distance Str	ucture is	from Sho	reline:	□ Ye		☐ Yes
			<u> </u>			if yes	-continue	-					feet	≫ No		<b>⊠</b> No
Shoreland	r de la															
Value at Time	( or one				7 71,000		- CANADA		Kens		10	101000		18	1	
of Completion				D-			D			Total # of			What Ty			Type of
* include		Projec	t		oject Stories		Project Foundate	1100		bedrooms				ry System(s	)	Water
donated time & material				# 01 .	otories	495	rounda	tion		on property				operty or		on property
& material	New New	Constr	uction	<b>№</b> 1-St	orv		Basem	ent								
1-1				☐ 1-St		-	1=		T Kana			☐ Municipal/City ☐ (New) Sanitary Specify Type:				☐ City
	□ Addi	tion/Al	teration	Lo			Found	ation		<b>X</b> 2	(		y Spo	city type.		💢 Well
35.000,00	☐ Conv	ersion	_	☐ 2-St	orv	Îvî	Slab			□ 3	⅓ S	anitary (	Exists) Sp	ecify Type:		
			- f		.O1 y						1	_				
1 17 1	□ Reio		isting bldg)			_	Total Control							aulted (min	200 galloi	n)
	Prop		C32 OII			Use Non			□ None	□ Portable (w/service contract) □ Compost Toilet						
							SEAS	200000000000000000000000000000000000000			_	lone	lollet			
												ione				
Proposed Const	ire: (if add	lition, alt	eration or bu	isiness is b	eing app	lied for)				28	Widt			Heig		
Proposed Const	truction:	(overa	all dimension	ns)			Len	gth:	7	0	Widt	<mark>ား</mark> ဩ	3	Heig	ht: 9	'4"
Proposed L	Isa	1						J C4		Negrativa de la comp			and Ame			Square
. Toposcu c	30	Pic.		1 4 1 4			Propose				r w			Dimensions	A The Year	Footage
			Principal					The second second	y) .				(	Х	)	
			Residence			nting s	hack, et	c.)					(	Х	)	
Residentia	l Use		-	with	Lott a Porch								( )	X	)	
		-			2 <sup>nd</sup> ) Po								(	X	)	
					Deck	,, (1)				11 136		,	(	X	)	
			4 - 4		2 <sup>nd</sup> ) De	eck							1	X	)	
□ Commercia	al Use			8.0	Attache		age			7		-	(	χ.	)	
			Bunkhou					niiarto	rs o	r 🗆 cooking (	& food	ron faciliti	26) /	X	1	
and the same of				Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities) (  Mobile Home (manufactured data)								5) (	X	1	1	
□ Municipal	Hee		Mobile Home (manufactured date)  Addition/Alteration (explain)								_   (		)			
☐ Municipal	ose	×	0.00									)	1110			
			70 180								1120 _					
		Special Use: (explain) (X)														
15/31		Conditional Use: (explain) ( X )  Other: (explain) ( X )														
1. 7.5.3						1/ 1/2		- A	-			S. W.L.	1 (2)	X X Y		
I (we) declare that this	application (	including a	FAILURE TO	OBTAIN A	PERMIT O	START	ING CONS	TRUCTION	N WIT	THOUT A PERM	IT WILL RI	SULT IN PE	NALTIES			
(are) responsible for th	ie uetan anu	accuracy of	all information	i (we) am (ar	e) providin	ig and that	IT WILL he re	lied upon	ny Ray	diald County in d	atarmining			1 15		
result of Bayfield Cour property at any reason	ity relying of	tills illion	nation i (we) an	i (are) provid	ng in or wi	ith this ap	plication. I (	we) conser	nt to c	county officials ch	arged with	administering	county ordina	nces to have acco	ess to the ab	ove described
Owner(s):	CAL	2	and	re-		HI.	ned	e n	7	and	MON	7	no.	te	2/20	1711
(If there are Mul	tiple Owne	ers listed	on the Deed	All Owner	s must si	gn <u>or</u> le	tter(s) of	authoriza	ation	must accomp	any this a	pplication	_ Da		HAL	3.70

(See Note below) Date (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Attach

Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

RECEIVED

#### In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1)Show Location of: **Proposed Construction** 

(2) Show / Indicate: North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(4)

(3)Show Location of (\*):

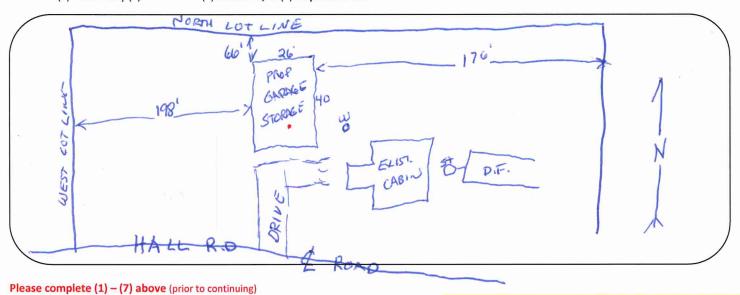
(\*) Driveway and (\*) Frontage Road (Name Frontage Road) Show:

Show: (5)

All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (6)

(7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%



Changes in plans must be approved by the Planning & Zoning Dept.

#### (8) Setbacks: (measured to the closest point)

Description	Setback Measurem			Description	Setback Measurements		
Setback from the Centerline of Platted Road	130'	Feet		Setback from the <b>Lake</b> (ordinary high-water mark)	Feet		
Setback from the Established Right-of-Way	130	Feet		Setback from the <b>River</b> , <b>Stream</b> , <b>Creek</b>	Feet		
,			e II	Setback from the Bank or Bluff	Feet		
Setback from the <b>North</b> Lot Line	66	Feet					
Setback from the <b>South</b> Lot Line	961	Feet		Setback from Wetland	Feet		
Setback from the West Lot Line	1981	Feet		20% Slope Area on the property	🗆 Yes 💢 No		
Setback from the <b>East</b> Lot Line	176'	Feet		Elevation of Floodplain	Feet		
Setback to Septic Tank or Holding Tank		Feet		Setback to Well	∂o¹ Feet		
Setback to Drain Field	137'	Feet					
Setback to Privy (Portable, Composting)		Feet					

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the ow

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense

### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

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Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:			
Permit Denied (Date):	Reason for Denial:						
Permit #:	Permit Date:			THE PARTY OF THE ST			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Recor	ous Lot(s)) 🛮 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required ☐ Yes ☐ No ☐ Yes ☐ No			
Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:		Previously Granted by  Yes No	y Variance (B.O.A.) Case	e#:			
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No		Were Property Lines Represented by Owner Was Property Surveyed  Wes					
Inspection Record: Hav Hydraet? - Pres	squre?	1	A STATE OF THE PARTY OF	Zoning District ( F= / ) Lakes Classification ( V / )			
Date of Inspection: 6/9/22	Inspected by:		Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached.)  - Not for Human Habitation or Sleeping  - If pressurized water enters structure, get predect septic permits							
Signature of Inspector:	Name of the Parket			Date of Approval: 8/15/22			
Hold For Sanitary: 🗆 Hold For TBA: 🗅 _	Hold For Affic	davit: 🗆	Hold For Fees: 🗆 🔻				

# Real Estate Bayfield County Property Listing

Today's Date: 7/8/2022

**Property Status: Current** 

Created On: 3/15/2006 1:14:49 PM

Description	Updated: 11/28/2006
Tax ID:	2729
PIN:	04-004-2-45-09-23-1 02-000-10000
Legacy PIN:	004118201990
Map ID:	
Municipality:	(004) TOWN OF BARNES
STR:	S23 T45N R09W
Description:	PAR IN NW NE IN V.838 P.918 IM 2002R-477323
Recorded Acres:	0.000
Calculated Acres:	0.000
Lottery Claims:	0

Yes

Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
004	TOWN OF BARNES
041491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE

1	<b>Recorded Documents</b>	
63	CONVERSION	

Date Recorded:

First Dollar:

ESN:

477323 583-95;830-867;838-918

Updated: 3/15/2006

Ownership

Updated: 3/15/2006

DAVID L & GLENDA M ANDERSON

BALDWIN WI

**Billing Address:** DAVID L & GLENDA M **ANDERSON** 1200 200TH ST BALDWIN WI 54002

**Mailing Address:** DAVID L & GLENDA M **ANDERSON** 1200 200TH ST

BALDWIN WI 54002

Sit

te Address \* indicates Private Road

5610 HALL RD

**BARNES 54873** 

Property Assessment	Updated: 10/4/2016				
2022 Assessment Detail					
Code	Acres	Land	Imp.		
G1-RESIDENTIAL	8.200	18,800	84,700		
2-Year Comparison	2021	2022	Change		
Land:	18,800	18,800	0.0%		
Improved:	84,700	84,700	0.0%		
Total:	103,500	103,500	0.0%		



Property History

# Bayfield County, WI



## Real Estate Bayfield County Property Listing

Today's Date: 8/8/2022

**Property Status: Current** 

Created On: 3/15/2006 1:14:49 PM

Description

Tax ID:

2729

04-004-2-45-09-23-1 02-000-10000

Updated: 11/28/2006

PIN: Legacy PIN:

004118201990

Map ID:

(004) TOWN OF BARNES

Municipality:

STR:

S23 T45N R09W

Description:

PAR IN NW NE IN V.838 P.918 IM

2002R-477323

Recorded Acres:

Calculated Acres:

0.000 0.000

Lottery Claims: First Dollar:

0 Yes

ESN:

Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
004	TOWN OF BARNES
041491	SCHL-DRUMMOND
001700	TECHNICAL COLLEGE



Date Recorded:

477323 583-95;830-867;838-918

Updated: 3/15/2006

Ownership

DAVID L & GLENDA M ANDERSON

Updated: 3/15/2006 BALDWIN WI

**Billing Address:** DAVID L & GLENDA M **ANDERSON** 

1200 200TH ST BALDWIN WI 54002 Mailing Address: DAVID L & GLENDA M ANDERSON

1200 200TH ST BALDWIN WI 54002

\* indicates Private Road

5610 HALL RD **BARNES 54873** 

Property Assessment	Updated: 10/4/20				
2022 Assessment Detail		**************************************			
Code	Acres	Land	Imp.		
G1-RESIDENTIAL	8.200	18,800	84,700		
2-Year Comparison	2021	2022	Change		
Land:	18,800	18,800	0.0%		
Improved:	84,700	84,700	0.0%		
Total:	103,500	103,500	0.0%		



Property History

# Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

8-22-2022

Date

BOA –													
No.	22-0	187	•		Issue	d To:	DAVID	L & GLENDA M A	NDER	SON			
Location:	nw	1/4	of	NE	1/4	Section	23	Township	45	N.	Range <b>9</b>	W.	Town
Gov't Lot			l	_ot		Blo	ock	Subdivision			CSI	<b>√l#</b>	
Residenti For: Acces			Sto	ry ];	garag	<u>је</u> (28' х	40') = 11	20 sq. ft. ] Height on sor development would		addition	al permitting.		
You are responsible for	pr complying	erm	or H	umar requ	n Hak	prior. M	or Sleepi ust mee	ng Purposes. If Prost and maintain setl	essuri backs	zed wa includ	ater enters s ling eaves a an be difficult to identify.	and overh Failure to comply may	angs. y result in removal o
NOTE: This permit expires one year from date of issuand work or land use has not begun.						Tracy Pooler, AZA							
						I W ( ) -		t alatainin manananal			Authorized	Issuing Off	icial
Ch	anges ir	า plar	is or s	specific	ations	shall not be	made with	out obtaining approval.					

This permit may be void or revoked if any of the application information is found

This permit may be void or revoked if any performance conditions are not

to have been misrepresented, erroneous, or incomplete.

completed or if any prohibitory conditions are violated.

### SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Address to send permit

Authorized Agent:

## **APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

MAY 16 2022

Bayfield Co.
Planning and Zoning Agency

Permit #:	22-0194
Date:	
Amount Paid:	8175 6-14-22 Spluse-A JIb-
Other:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START C	ONSTRUCTIO	ON <u>UNTI</u>	ALL PERMITS	HAVE BEEN	ISSUED TO	O APPLICANT.	Origi	nal App	lication !	MUST be	submit	tted	FILL OUT IN I	NK (NO P	ENCIL)
TYPE OF PERMIT	REQUESTE	D -	□ LANE	USE 🗆	SANITA	ARY   PRIVY		CONDIT	IONAL U	SE 🗆 SI	PECIAL I	USF I		OTHER	Street Contract Contract
Owner's Name:	. 11.1	ler			1 2 1 10	ng Address:				City/State/	Zip:	_		Telephone	
Address of Proper	tv:					24 Edge ty/State/Zip:	طس	ekd		Sain	- Pa	ul	UN 55116	651.4	85 764
	486	65	Stre	Rd			WI							Cell Phone	
Email: (print clea	irly) W	1111	1628 (	a an	. 1	con								1	
Contractor:				0	_	actor Phone:		Plumb	er:					Plumber F	Phone:
Authorized Agent	: (Person Sign	ning Appli	cation on hehalf	of	Agent	Phone:			na :1: .						
Owner(s))					Agent	i none.		Agent	ivialling A	ddress (inc	lude City	/State/Z	(ip):	A CONTRACTOR OF THE PARTY OF TH	uthorization (for Agent)
PROJECT	Legal Desc	ription:	(Use Tax Sta	tement)	Ta	ix ID#	-			7 3	" 9 NF	Recor	ded Document:		
LOCATION						220						-			
1/4,	1/4	Go	v't Lot	Lot(s)	CSM	Vol & Page	CSM D	oc#	Lot(s)	# B	ock #	Subdi	vision:		
Section 20	T	\	ч	20		Town of:			4	į.	-	Lat Ci	V		
Section	, Towns	nip	N, Ran	ge <u>0 1</u>	_ W		150	snes		DEALE.		Lot Siz	" <del>1,38</del> -9	Acreage	8
	☐ Is Pro	perty/L	and within 3	00 feet of		ream (incl. Intermi		Dist	ance Stru	icture is fi	om Sho	reline :	Is your Pr	operty	
Shoreland			vard side of I			yescontinue	<b>→</b>	-				fee	et in Flood	plain	Are Wetlands Present?
	Is Pro	perty/L	and within 1	.000 feet o	f Lake, Po	ond or Flowage yescontinue		Dist	ance Stru	icture is fi	om Sho			es	□ Yes
□ Non-	3		<del>1 - 1</del>			, continue				73		fee	et N	0	No.
Shoreland															
Value at Time	A BOTH FAS			PERCENT.	AV. UK.		T PAY			J 4 G 1 2 G			Cast State of the		
of Completion * include		Droin		Pro	ject	Project		100	otal # of		Sewe		t Type of itary System(s		Type of
donated time		Proje	cı	# of S	tories	Foundati	0.0		on				property or		Water
& material		He			1,5480			p	roperty	J. A. T.	Will	be on	the property		property
	□ New	Const	ruction	☐ 1-Sto		<b>₽</b> Baseme	nt	<u> </u>	1		nicipal				☐ City
ė	☐ Addi	ition/A	lteration	☐ 1-Sto		☐ Foundar	tion		2		ew) San	itary	Specify Type:		<b>∌</b> ≪A7ell
\$	□ Conv	ersion		<b>≥</b> 2-Sto	orv.	□ Slab		-		Ş Sar	itary (E	Exists)	Specify Type:		
ic					J1 y				3		Sep	lic	11.		
	Run		risting bldg)			Use							Vaulted (min	200 gallon)	
	Prop		in " )!		,	∠ Year Ro	und	□ None □ Portable (w/se					ce contract)		-{
										□ No		-			**
<b>Existing Struct</b>	ure: (if add	dition, al	teration or bu	siness is be	ing applie	ed for) Leng	th:	20	7	Width:		0	Unit	he. O	6
Proposed Con	struction:		all dimensior			Leng	th:	٠,		Width:	ی	7	Heig Heig	-	
			STATE OF	LOGAL.		The Kithan		7.1			Transier in				
Proposed	Use	1	of the sure			Proposed	Struct	ure					Dimensions	5	Square Footage
						tructure on pr		<b>(</b> )				(	Х	)	rootage
<b>4</b>			Residenc	e (i.e. cab with L		ting shack, etc.	)					(	Х	)	
Residenti	al Use			with a								(	X	)	
Den D.	100		E		2 <sup>nd</sup> ) Por	ch	5-1 B	13		-		1	X	)	
V. Carlotte			* 1	with a		ch	a sum	1				(	X	)	
☐ Commerc	ial Use				2 <sup>nd</sup> ) Dec							(	Х	)	
			Runkha			l Garage	= 10 = 10 = 10 = 10 = 10 = 10 = 10 = 10		10.00		-	(	Х	)	
			Mohile H	ome (mar	oufacture	or □ sleeping o	quarter	s, <u>or</u> 🗌	cooking &	food prep	facilitie	es) (	X	)	
☐ Municina	l Use						- 47					- (	X	)	
amcipa	Acceptant Building (X)														
	-					on/Alteration	(explai	in)				1	29 x 30	2)	
		X	Special U				10000	teri	w N	relat		1	X X		
1 6			Condition				ų.					1	X	)	
1-16			Other: (ex	kplain)								1	X	)	
I (wa) doclare the co	de aprilles d	the alone to	FAILURE TO	OBTAIN A P	ERMIT or	STARTING CONSTR	UCTION	WITHOU	IT A PERMI	T WILL RESI	JLT IN PE	NALTIES		,	
(are) responsible for	the detail and	accuracy o	f all information	R (mo) am (am)	nas been e	xamined by me (us) a	nd to the	best of my	(our) knowle	edge and belie	f it is true,	correct a	nd complete. I (we)	acknowledge th	at I (we) am
property at any reason	onable time for	the purpo	nation I (we) am ose of inspection.	0.1	M. L.		e) consen	t to county	officials cha	rged with adr	ninistering	county or	dinances to have acc	ess to the abov	e described
Owner(s):		mi	8		rell		9420	TIN.	12 4	e compet	6 11	CON.	Date <u>5</u>	12/27	1. V.M.
(If there are M	uitiple Owh	ers listed	on the Deed	All Owners	must sign	or letter(s) of au	thoriza	tion mus	t accompa	iny this app	lication)	W	347 62.00	- N 18	the state of

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Copy of Tax Statement If you recently purchased the property send your Recorded Deed

Date

## In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Show Location of: (1)(2)

Show:

Show:

(3)

(4)

(5)

**Proposed Construction** 

North (N) on Plot Plan Show / Indicate:

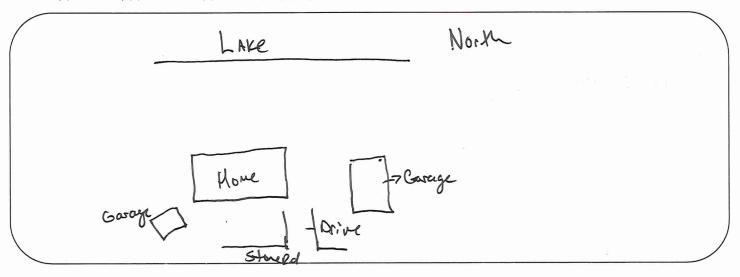
Show Location of (\*):

(\*) Driveway and (\*) Frontage Road (Name Frontage Road) All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

Show any (\*): (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (6)

(7)Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

Fill Out in Ink - NO PENCIL

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements		
Setback from the Centerline of Platted Road	Feet	in	Setback from the Lake (ordinary high-water mark)		Feet	
Setback from the Established Right-of-Way	Feet	Mi	Setback from the River, Stream, Creek	Fee		
			Setback from the Bank or Bluff		Feet	
Setback from the <b>North</b> Lot Line	Feet					
Setback from the <b>South</b> Lot Line	Feet		Setback from Wetland		Feet	
Setback from the West Lot Line	Feet		20% Slope Area on the property	☐ Yes	□No	
Setback from the East Lot Line	Feet		Elevation of Floodplain		Feet	
Setback to Septic Tank or Holding Tank	Feet	No.	Setback to Well		Feet	
Setback to Drain Field	Feet					
Setback to Privy (Portable, Composting)	Feet	Öl-				

um required setback, the boundary line from which the setback must be measured must be visible from one previous Prior to the placement or construction of a structure within ten (10) feet of the m other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use	Only) Sanitary Nu	mber: 4	25093	# of bedrooms: 2	Sanitary Date:	7-2-04	
Permit Denied (Date):	Reason for			n 其作明 phr e		A CONTRACTOR OF	
Permit #:	Permit Date	:		Committee of the Commit			
Is Parcel in Common Ownership	(Deed of Record) (Fused/Contiguous Lot(s))	No No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached	☐ Yes ☑ No ☐ Yes ☑ No	
Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:			Previously Granted by  Yes No	y Variance (B.O.A.) Case	e #:		
	Yes 🗆 No		Were Property Line	es Represented by Owner Was Property Surveyed	☐ Yes ☐ No ☐ No		
Inspection Record:  Date of Inspection: 1wo 7-1	- 🤈 Inspected b	y: A	nole.	ormania di benerali di ben	Zoning District Lakes Classification Date of Re-Inspe		
	nditions Attached? Yes	+Abia	based won go	estic & Zing con Tay I com esting, Maintai	New 45 for Joace of Apple	#21-0339 roval: @//a/as	
	rTBA: 🗆 F	Hold For Affi	davit: 🔲	Hold For Fees:			

# TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department P.O. Box 58 – Washburn, WI 54891

Phone - (715) 373-6138 Fax - (715) 373-0114

e-mail: zoning@bayfieldcounty=Wisquiv

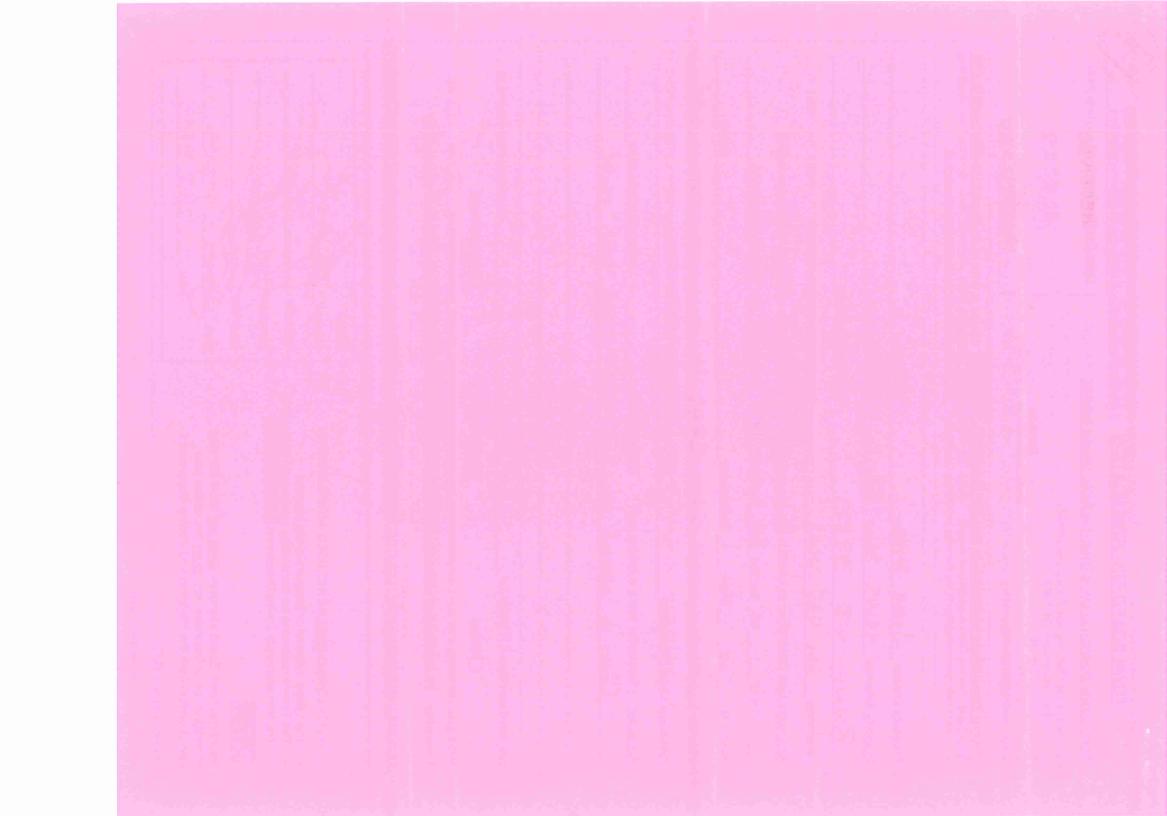
www.bayfieldcounty. wir gov

Date Zoning Received: (Stamp Here)

JUL 25 2022

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 ½ x 14) [front/back]. This is a Class A special use request. Note: The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. <u>Ask Town if you should be present at their meeting(s).</u>

Property Owner <u>Jesse</u> Mille Con	ntractor									
Property Address 4865 Stone Rd Aut	norized Agent									
Barnes WI 54873 Age	ent's Telephone									
Telephone 651 · 485 · 7668 Wri	tten Authorization Attached: Yes ( ) No ( )									
Accurate Legal Description involved in this request (specify only	the property involved with this application)									
1/4 of1/4, Section 20, Township 44 N., R	ange 09 W. Town of Bounes									
Govt. LotLot Block Subdivision										
Volume Page of Deeds Tax I.D# 220										
Additional Legal Description:	그 사고도로 살아 본지 않는 것이 되었다면 보다 보고 있다면 보다 보고 있다면 보다 되었다면 보									
Applicant: (State what you are asking for) Zoning District										
Class A special pern't / wi	t short term rental									
r										
We, the Town Board, TOWN OF	, do hereby recommend to									
☐ Table ☐ Approval	☐ Disapproval									
Have you reviewed this for Compatibility with the Comprehen	sive and/or Land Use Plan: Yes   No									
Township: (In detail clearly state Town Board's reason for recom										
complies with requireme	ents									
	Signed:									
** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM:	Chairman: Hand									
<ol> <li>The Tabled, Approval or Disapproval box checked</li> <li>The Town's reasoning for the tabling, approval or disapproval</li> </ol>	Supervisor:									
3. The form returned to Zoning Department not a copy or fax	Supervisor: Gall									
** NOTE:	Supervisor: Supervisor:									
Receiving Town Board approval, <u>does not</u> allow the start	227									
	Clerk: Findly Ochcase									
of construction or business, you <u>must</u> first obtain your permit card(s) from the Planning and Zoning Department.	Clerk: Judy Ocnase  1/19/2022									



# TOWN OF BARNES TREASURER JUDY BOURASSA

JESSE J & CHRISTINA M MILLER

1624 EDGECUMBE RD

ST PAUL MN 55116

3360 CO HWY N BARNES WI 54873

Phone: (715) 795-2782

#### STATE OF WISCONSIN - BAYFIELD COUNTY REAL ESTATE PROPERTY TAX BILL FOR 2021

PAYMENTS should reference: Tax ID: 2201

DOCUMENT RECORDING, or anything else should reference:

04-004-2-44-09-20-1 05-002-05000

Alternate/Legacy ID: 004-1127-10 000

Ownership: JESSE J & CHRISTINA M MILLER

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information. Property Description / Location of Property
48665 STONE RD

**Description:** Sec 20 Tn 44 Rg 09 2 PAR IN LOT 2 V.223 P.190 (1.15A) & LOT A OF CSM V.5 P.204 IN DOC 2020R-584062

Please include self-addressed, stamped envelope for return receipt. Please inform your treasurer of any billing address changes. Acreage: 1.380 2020R-584062 Document: 3,853.00 **Net Assessed Value** Real Estate Tax: Assessed Value Average -20.39 First Dollar Credit: Total **Assessment Ratio** Rate (Does NOT reflect lottery Lottery Credit -0.003,832.61 \$246,000 \$152,200 \$398,200 0.92671 or first dollar credit) Net Real Estate Tax: 3,832.61 0.009676021 Total Due: School taxes reduced by Estimated Fair Market Value An "X" means unpaid For full payment pay to TOWN OF BARNES school levy tax credit. \$229.69 Total prior year taxes. Land Improved treasurer by January 31, 2022 \$265,500 \$164,200 \$429,700 % Tax Estimated State Aids **Net Tax** Change Warning If not paid by due dates, **Allocated Tax District** 2021 1,737.61 1,038.93 **2020** 125,995 400,212 2021 135,560 408,212 2020 1,715.58 1,005.92 Taxing Jurisdiction installment option is lost and total tax is COUNTY TOWN OF BARNES delinquent and subject to interest and if 3.3 SCHL-DRUMMOND TECHNICAL COLLEGE 198,600 208,048 966.55 938.55 -2.9 applicable, penalty. (See reverse) -8.5 150.76 137.91 261,719 278,026 3,838.81 3,853.00 0.4 Totals 986.526 1.029.846 First Dollar Credit

Pay 1st Installment Of: Or Pay Full Payment Of: by January 31, 2022

Lottery & Gaming Credit

Net Property Tax

3,832.61

1,916.31 Pay 2nd Installment Of:

1.916.30

0.0

0.00

3,832.61

by July 31, 2022 Amount enclosed:

JESSE J & CHRISTINA M MILLER Tax ID: 2201 (004)

Make payment payable and mail to: TOWN OF BARNES TREASURER JUDY BOURASSA

3360 CO HWY N **BARNES WI 54873** 

Include this stub with your payment Or to Pay Online see Credit

Card Payments on back

JESSE J & CHRISTINA M MILLER

3,764.87

Tax ID: 2201 (004)
Make payment payable and mail to: BAYFIELD COUNTY TREASURER

JENNA GALLIGAN PO BOX 397 WASHBURN WI 54891

Include this stub with your payment

YEAR LOLARE DAYNER COUNTY FIODERLY LIGHTY

'oday's Date: 11/12/2021

Created On: 3/15/2006 1:14:47 PM

. roperty status current

Description Updated: 9/8/2020 Tax ID: 2201 PIN: 04-004-2-44-09-20-1 05-002-05000 Legacy PIN: 004112710000 Map ID: 1unicipality: (004) TOWN OF BARNES STR: S20 T44N R09W 2 PAR IN LOT 2 V.223 P.190 (1.15A) & Description: LOT A OF CSM V.5 P.204 IN DOC 2020R-584062 1.380 Recorded Acres: Calculated Acres: 1.318 0 .ottery Claims:

Yes

104

Tax Districts	Updated: 3/15/2006
•	STATE
)4	COUNTY
)04	TOWN OF BARNES
)41491	SCHL-DRUMMOND
101700	TECHNICAL COLLEGE

(R-1) Residential-1

3	Recorded Documents	Updated: 3/15/200

#### **■ WARRANTY DEED**

First Dollar:

'oning: :SN:

Date Recorded: 9/3/2020 2020R-584062

#### **3** SPECIAL WARRANTY DEED

2017R-571135 Date Recorded: 12/11/2017

#### **■ TERMINATION OF DECEDENT'S INTEREST**

Date Recorded: 9/30/2008 2008R-523077 1003-547

#### CONVERSION

223-190;573-205;740-182 Date Recorded:

#### QUIT CLAIM DEED

Date Recorded: 7/14/1998 442517 740-182 Ownership

Updated: 9/8/2020

**JESSE J & CHRISTINA M MILLER** 

ST PAUL MN

**Billing Address: JESSE J & CHRISTINA M** 

**Mailing Address: JESSE J & CHRISTINA M** 

**MILLER MILLER** 1624 EDGECUMBE RD

1624 EDGECUMBE RD ST PAUL MN 55116

F Site Address \* indicates Private Road

ST PAUL MN 55116

48665 STONE RD \* **BARNES 54873** 

Property Assessment	Updated: 10/4/2016			
2021 Assessment Detail				
Code	Acres	Land	Imp.	
G1-RESIDENTIAL	1.380	246,000	152,200	
2-Year Comparison	2020	2021	Change	
Land:	246,000	246,000	0.0%	
Improved:	152,200	152,200	0.0%	
Total:	398,200	398,200	0.0%	



Town, City, Village, State or Federal Permits May Also Be Required

LAND USE – X Sanitary – 425093 SPECIAL – A (Tn of Barnes-7/192022) CONDITIONAL – BOA –

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22	-0194		ssued To:	JES	SE J & CHR	STINA	M MILLI	ER			
Locatio			LOT 2 V	<b>/.223 P.1</b>	90 (1.15 Section	A) & LOT A 20Township		M V.5 P. N.Range	204 9	W.	Town of <b>barnes</b>	
Gov't Lo	ot		Lot		Block	Su	odivisio	n			CSM#	
Residential Use in R-1 zoning district For: (1-Unit) Short Term Rental of existing 2-Story Residence												
Condit	tion(s):	To be	rented	as a 2 -	bedroon		ea res	sidence.	Conta	ct Co	unty Health Department ransferable if property is	
		sold.	Garage	building		ermitted for					aintain shoreland	
NOTE:					f issuance if	the authorized co	nstructio	n		Т	racy Pooler, AZA	
		and use ha	-						Authorized Issuing Official			
	This perr	nit may be	void or re	evoked if any		without obtaining cation information ete.				8	-22-2022	
					/ performand are violated	e conditions are	not				Date	

# SUBMIT: COMPLETED APPLICATION, TAX STAT. T AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

#### **APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN**

# RE Date Stamp (Received)

JUL 20 2022

Bayfield Co.

Permit #:	22-0193
Date:	8-22-2022
Amount Paid:	285.cm
Other:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

TYPE OF PERMIT	REQUESTED -	→ □ LAN	D USE   SANITA	RY D PRIVY D	CONDITIONAL US	SE SPECIAL US	E □ B.O.	A. OTHE	R
Owner's Name:	1		The state of the s	g Address:		City/State/Zip:	ь о.о.		phone:
Denni	Mille		47	74 Louis		Breyman, H	111 555	799 (219)	
Address of Propert	y .	1 1	Cit	y/State/Zip:		The state of the	re ou	010	-7741
52250 P	ease p	el.		somes, is	T 5487	3	X+ ==	Cell	Phone:
Email: (print clear	19)			,					
Contractor:	χ		Contra	ctor Phone:	Plumber:			Plun	nber Phone:
		4		100	11				
Authorized Agent: Owner(s))	(Person Signing A	oplication on beha	If of Agent	Phone:	Agent Mailing Ad	ddress (include City/St	ate/Zip):	Writ	tten Authorization
Owner(s))	IN AND COLOR SELECT			H 7 18					quired (for Agent)
PROJECT	egal Descriptio	n: (Use Tax St		221102		\ \ R	ecorded Do	cument: (Showing	g Ownership)
LOCATION				3248	ma <sup>y</sup>	-	10//	1 2	70516
1/25/2m, 5/	1/4	Gov't Lot	Lot(s) CSM	Vol & Page   CSM	Doc# Lot(s)	# Block # S	ubdivision:		
				A					
Section 36	_ , Township _	45 N, Rar	nge <u>09</u> w	Town of:		L	ot Size	A	creage
				13a	was			/	9,680
	☐ Is Propert	y/Land within	300 feet of River, Str	eam (incl. Intermittent)	Distance Stru	cture is from Shorel	ine :	s your Property	A
□ Charaland	Creek or Lar	dward side of	Floodplain? If	yescontinue>		- 55 - 65 - 64 - 65 - 65 - 65 - 65 - 65	_feet	in Floodplain	Are Wetland Present?
- Siloreland	ls Propert	y/Land within	1000 feet of Lake, Po	nd or Flowage	Distance Stru	cture is from Shorel	ine :	Zone?	☐ Yes
	5.0		- If	yescontinue -			_feet	□ No	□ No
Non-	A	4000	4.4		F 7 11 P				
Shoreland									
Value at Time	THE THE VIEW					I and the second	VIII -	V 20	
of Completion	100			Taran Lauran				of	Type of
* include	Pro	oject	Project # of Stories	Project	bedrooms		Sanitary S		Water
donated time			# of Stories	Foundation	on		the prope		on
& material	M Now Con		Ma cu		property  □ 1		on the pr	operty?	propert ☐ City
	XNew Cor	struction	1-Story	☐ Basement	☐ Municipal/C				
	☐ Addition/Alteration ☐ 1-5i		☐ 1-Story +	☐ Foundation	<b>X</b> 2	(New) Sanitary			<b>X</b> WeⅡ
\$ 07 000			LOIT	-		-			
15,000;	☐ Conversi	on	☐ 2-Story	✓ Slab	□ 3	Sanitary (Exi	sts) Specify	s) Specify Type:	
	Relocate	(existing bldg)				Driver (Dit)		h1/ : 200	
	☐ Run a Bu			Use	□ None	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon) ☐ Portable (w/service contract)			allon)
	Property			X Year Round	- None	Compost Toile			
	& you	els I	16 unelly			□ None			
			usiness is being applie			Width:		Height:	
Proposed Cons	struction: (o	verall dimension	ons)	Length:	40	Width: 10	0	Height:	24
					TO SECURITION OF				
Proposed	Use ✓			Proposed Stru	cture		Dim	nensions	Square Footage
		Datastas	I Structure (first s	tructure on proper	tv)		1	X )	Tootage
	[	Principa			.,		1	X )	
	_		ce (i.e. cabin, hunt	ing shack, etc.)			1.0		
S Posidonti	2		ce (i.e. cabin, hunt with Loft	ing shack, etc.)			1	X )	
X Residentia	2		with Loft	ing shack, etc.)			(	X )	
Residenti	2						(	x )	
Residentia	2		with Loft with a Porch				(	x )	
	al Use		with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck	ch			(	x ) x ) x )	
Residentia	al Use		with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec	ch k	32,		(	X ) X ) X )	
	al Use	Residen	with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec	ch k Garage	ore or $\square$ coalting $2$			X ) X ) X ) X ) X )	
	al Use	Residen	with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec with Attached use w/ (□ sanitary,	ch  k  Garage  or   sleeping quart				x ) x ) x ) x ) x ) x ) x )	
□ Commerc	ial Use	Residen  Bunkho  Mobile	with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec with Attached use w/ ( sanitary,	ch  K  Garage  or   sleeping quart  d date)				x ) x ) x ) x ) x ) x ) x ) x ) x )	
	ial Use	Residen  Bunkho  Mobile  Addition	with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec with Attached use w/ (□ sanitary, Home (manufacture	ch  K  Garage  or   sleeping quarted date)				x ) x ) x ) x ) x ) x ) x ) x ) x )	
□ Commerc	ial Use	Residen  Bunkho Mobile Addition Accesso	with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec with Attached use w/ (□ sanitary, Home (manufacture n/Alteration (explain ry Building (explain	ch  k  Garage  or  sleeping quart d date)  in)				x ) x ) x ) x ) x ) x ) x ) x ) x )	
□ Commerc	ial Use	Residen  Bunkho Mobile Addition Accesso	with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec with Attached use w/ (□ sanitary, Home (manufacture n/Alteration (explain ry Building (explain	ch  K  Garage  or   sleeping quarted date)				x ) x ) x ) x ) x ) x ) x ) x ) x )	
□ Commerc	ial Use	Residen  Bunkho  Mobile  Addition  Accesso  Accesso	with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec with Attached use w/ (□ sanitary, Home (manufacture n/Alteration (explain ry Building (explain	ch  k  Garage  or  sleeping quart d date)  in)				x ) x ) x ) x ) x ) x ) x ) x ) x ) x )	
□ Commerc	ial Use	Bunkho Mobile Addition Accesso Special I	with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec with Attached use w/ (□ sanitary, Home (manufacture n/Alteration (explain ry Building (explain) Use: (explain)	ch  k  Garage  or  sleeping quart d date)  in)				x ) x ) x ) x ) x ) x ) x ) x ) x ) x )	
□ Commerc	ial Use	Residen  Bunkho  Mobile  Accesso  Accesso  Special to Condition	with Loft with a Porch with (2 <sup>nd</sup> ) Porc with a Deck with (2 <sup>nd</sup> ) Dec with Attached use w/ (□ sanitary, Home (manufacture n/Alteration (explain ry Building (explain) ry Building Addition Use: (explain) onal Use: (explain)	ch  k  Garage  or  sleeping quart d date)  in)			( ( ( ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	x ) x ) x ) x ) x ) x ) x ) x ) x ) x )	4,000

property at any reasonable time for the purpose of inspection.

Owner(s): Danie Brille	पुरु बेह्नुको हो। यह उस में सी अवने हा हा व
(If there are Multiple Owners listed on the Deed <u>All</u> Owners	must sign or letter(s) of authorization must accompany this application)
Authorized Agent:	(See Note below)
(If you are signing on behalf of the owner(s	a letter of authorization must accompany this application)

Address to send permit

Date	12	0	de	
	0	1		
Date	W 11 W		3-2	1

<u>Attach</u>	

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1) Show Location of: **Proposed Construction** 

(2)Show / Indicate: North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

EWEN

(4)Show:

(3)Show Location of (\*):

(\*) Driveway and (\*) Frontage Road (Name Frontage Road) All Existing Structures on your Property

(5) Show: Show any (\*): (6)

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (\*) Wetlands; or (\*) Slopes over 20%

(7)Show any (\*): 40 x 100 garage E. W. PS61

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

	Setback Measurements		Description	Setb Measur	
700	Feet		Setback from the Lake (ordinary high-water mark)	Feet	
650	Feet		Setback from the River, Stream, Creek		Feet
	-,		Setback from the Bank or Bluff		Feet
165	Feet				
60	Feet		Setback from Wetland		Feet
650	Feet		20% Slope Area on the property	☐ Yes	ÆNο
1,950	Feet		Elevation of Floodplain		Feet
555	Feet		Setback to Well	450	Feet
520	Feet				
0.00	Feet				
	700 650 165 60 650	Measurements	Measurements	Measurements  Description  Too Feet Setback from the Lake (ordinary high-water mark)  Setback from the River, Stream, Creek Setback from the Bank or Bluff  Setback from Wetland Setback from Wetland Setback from Wetland Setback from Setback	Measurements  Description  Measure  700 Feet Setback from the Lake (ordinary high-water mark)  Setback from the River, Stream, Creek  Setback from the Bank or Bluff  165 Feet Setback from Wetland  650 Feet 20% Slope Area on the property  [1950] Feet Elevation of Floodplain  555 Feet Setback to Well  520 Feet

other previously surveyed corner or marked by a licensed surveyor at the owner's expense

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be ed by a licensed surveyor at the owner's expense.

### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

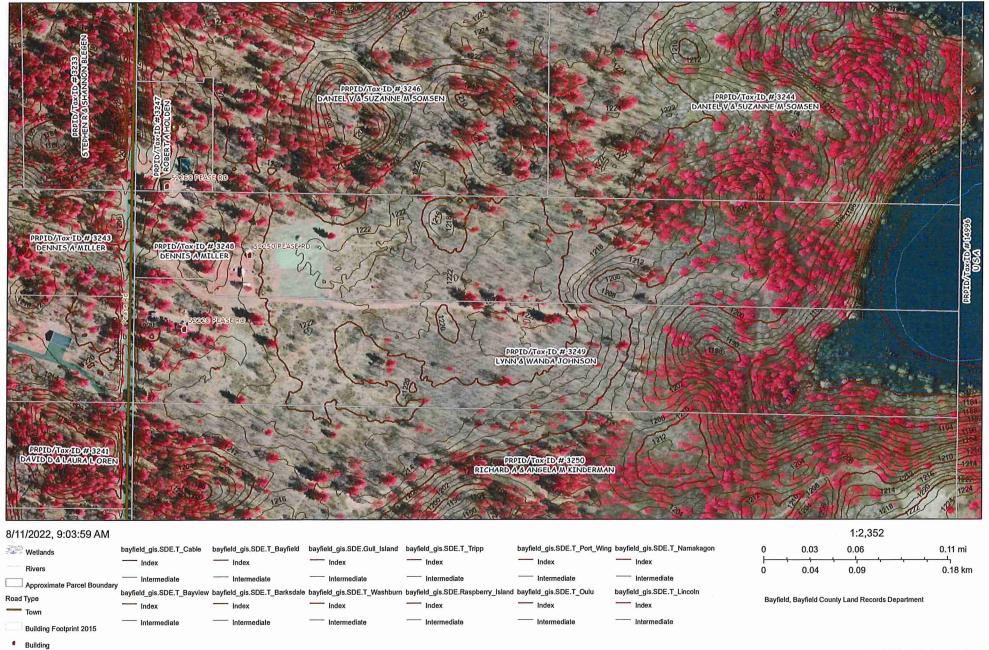
If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		Sanitary Date:	
Permit Denied (Date):	Reason for Denial:			
Permit #:	Permit Date:			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Re  'Yes (Fused/Conforming)  Yes	iguous Lot(s))	Mitigation Required Mitigation Attached	Yes No	Affidavit Required ☐ Yes ☐ No ☐ Yes ☑ No
Granted by Variance (B.O.A.)  ☐ Yes ☐ No  Case #:  Previously Granted by Variance (B.O.A.)  ☐ Yes ☐ No				e#:
Was Parcel Legally Created Was Proposed Building Site Delineated Was P				
Inspection Record:  Date of Inspection:	Inspected by:	Shele		Zoning District ( )  Lakes Classification ( )  Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions A  570RAGE - Not for Human H  If pressurized water enter	ttached?			.,'5
Signature of Inspector:				Date of Approval: 8/18/22
Hold For Sanitary:   Hold For TBA:	Hold For Affi	davit: 🗆	Hold For Fees: ☐	

(@August 2021) ®®January 2000

# Bayfield County, WI



#### Real Estate Bayfield County Property Listing

Today's Date: 8/11/2022

**Property Status: Current** 

Created On: 3/15/2006 1:14:50 PM

Description Tax ID:

Updated: 10/26/2017 3248

PIN: Legacy PIN: 04-004-2-45-09-36-4 03-000-10000 004122705000

Map ID:

Municipality:

(004) TOWN OF BARNES

STR: Description: S36 T45N R09W

N 1/2 S 1/2 SE LESS PAR IN DOC 2017R-570516 1389

Recorded Acres:

19.680 Calculated Acres: 19.635 Lottery Claims:

First Dollar:

Yes

Zoning: ESN:

001700

(F-1) Forestry-1 104

Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
004	TOWN OF BARNES
041491	SCHI-DDI IMMOND

Recorded Documents

**⊞** WARRANTY DEED Date Recorded: 10/23/2017 2017R-570516

**WARRANTY DEED** 

Date Recorded: 3/20/2006

TECHNICAL COLLEGE

Updated: 3/15/2006

2006R-505692 940-426

CONVERSION

Date Recorded: 693-432;721-155 🎎 Ownership

Updated: 10/26/2017

**DENNIS A MILLER** 

SAGINAW MN

**Billing Address: DENNIS A MILLER**  **Mailing Address: DENNIS A MILLER** 4774 LOUIS CT

SAGINAW MN 55779

4774 LOUIS CT

SAGINAW MN 55779

Site Address \* indicates Private Road

52250 PEASE RD **BARNES 54873** 

Property Assessment Updated: 3/25/2022 2022 Assessment Detail Code Acres Land Imp. G1-RESIDENTIAL 1,000 5,000 76,100 G5-UNDEVELOPED 2.000 500 0 **G6-PRODUCTIVE FOREST** 16.680 22,500 0 2021 2-Year Comparison 2022 Change

28,000 28,000 0.0% Improved: 3,905.3% 1,900 76,100 Total: 29,900 104,100 248.2%



BAYERELD COUNTY CHANG DIE 147 E. C. San Washoun H. S. 841 (118, 372-611)

# Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0193	Issued To:	DENNIS	A MILLER					-		
Location:	<b>n1/2s1/2</b> 1/4 of	<b>se</b> 1/4Se	ection 36	Township	45	N.	Range	9	W.	Town of	barnes
Gov't Lot	Lot		Block	Sul	odivisio	n				CSM#	
	al Structure in F- ssory: [ 1- Story ]; (Discla	garage (40	)' x 100') =	= 4000 sq. ft				ditiona	al perm	itting.	

Condition(s): Not for Human Habitation or Sleeping Purposes. If Pressurized water enters structure a sanitary permit is required prior. Must meet and maintain setbacks including eaves and overhangs.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE:	This permit expires one year from date of issuance if the authorized construction	Tracy Pooler, AZA
	work or land use has not begun.	Authorized Issuing Official
	Changes in plans or specifications shall not be made without obtaining approval.  This permit may be void or revoked if any of the application information is found	
	to have been misrepresented, erroneous, or incomplete.	8-22-2022
	This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.	Date

# SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

**Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

#### **APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN**

Date Stamp (Received)

JUL 14 2022

Bayfield Co.
Planning and Zoning Agency

Permit #:	22-0195 ENTE
Date:	
Amount Paid:	\$175 8-1-29 Spal-A 276
Other:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

Address to send permit 14295 AGENNOEVT

DO NOT START CO			, ,	HAVE BEEN ISSUED TO	APPLICANT.	Original	Application M	<u>IUST</u> be submi	tted	FILL OUT IN IN	k ( <mark>NO</mark>	PENCIL)
TYPE OF PERMIT R	REQUESTE	D ->	□ LAND			□ со	NDITIONAL US		USE 🗆		THER _	
Owner's Name: Whitney	H S	und	quist		Address:	edin-	Ne D	ty/State/Zip:	IN 5		Telephor	ne: 180-3942
Address of Property		1 1	7	City	/State/Zip:		WI	54873			Cell Phor	
55945 Email: (print clear	15	ond	Ur_	122 0 1	Barn		W.F	201010			701-6	80-3142
	W W	1000	bson			om			V.			• •
Contractor:				Contrac	tor Phone:		Plumber:				Plumber	Pnone:
Authorized Agent: Owner(s))	1 1	ing Applica	ation on behalf	of Agent P	hone: 580-0157		Agent Mailing Ad 4295 M	dress (include City		o): ! WI54821		Authorization d (for Agent)
PROJECT		12 M v	(Han Tou State	<u>Tax</u>	ID# 7~	25	70 15	Ke y III ke		ed Document: (St	owing Ow	(nership)
LOCATION	egal Descr		(Use Tax Stat		39	29	#	n n n	-510		767	34[
1/4,	1/4	Gov	't Lot	Lot(s) CSM	Vol & Page	CSM Doc	# Lot(s) #	Block #	Subdivi	awata	niE	states
Section 18	Townsh	nip 45	5 N, Rang	ze 09 w	Town of:	122	rnes		Lot Size	:	Acrea	e LOW
Section	_ , 10001131	"P	- 14) Kung			Ua			1-			
			and within 3 ard side of F	00 feet of River, Stre	eam (incl. Intermit		Distance Struc	ture is from Sho	oreline : feet		ain	Are Wetlands Present?
Shoreland -	Chapter Colors	TO THE OWNER OF THE OWNER OWNE	- O - O - O - O - O - O - O - O - O - O	000 feet of Lake, Po	nd or Flowage		Distance Struc	ture is from Sho	oreline :	Zone?		☐ Yes
				Ify	escontinue	→			feet			⊠ No
□ Non-		1	1 1 1				and the state of	See .		,		
Shoreland											I OUT A DATE OF	
Value at Time of Completion							Total # of			Type of		Type of
* include		Projec	t	Project # of Stories	Project Foundation	STATE OF THE PARTY	bedrooms on			ary System(s) property or		Water on
donated time & material							property	DO AND SERVICE AND ADDRESS OF THE PARTY OF		he property?		property
7	☐ New	Constr	uction	☐ 1-Story	☐ Baseme	nt	□ <b>1</b>	☐ Municipa			K =	☐ City
_	☐ Addi	tion/Al	teration	☐ 1-Story + Loft	K Foundat	tion	<b>X</b> 2	🗌 (New) Sar	<b>nitary</b> S	pecify Type:		Well
\$-0-	□ Conv		-	least of the Control	□ Slab		3	☐ Sanitary (	Exists)	Specify Type:		
				☐ 2-Story			3	CONT.		Vaultad /min 2	00 callor	
		cate (exi a Busin	ess on		Use		□ None	☐ Privy (Pit)		Vaulted (min 2 e contract)	oo ganor	<del>"</del>
	Prop	erty		1	☐ Year Ro	und		☐ Compost	Toilet	al		
	X 5/	HOLT	TELLY	REHTOL			u Um	□ None				
				siness is being applied	d for) Leng	th: 🤰	37	Width: 3	4	Heigh	/	/ '
Proposed Cons	truction:	(overa	all dimension	ns)	Leng	th:		Width:		Heigh	it:	
Proposed I	Use	1			Proposed	Structu	re			Dimensions		Square Footage
			Principal	Structure (first st	ructure on pr	operty)			(	X	)	Toolage
				e (i.e. cabin, hunti					(	Х	)	
X Residentia	al Use			with Loft			1, 8		(	X	)	
, .				with a Porch with (2 <sup>nd</sup> ) Porc	h				- (	X	)	
V 1				with a Deck		7.1	-		1	X	)	
_ c	:al llaa			with (2 <sup>nd</sup> ) Deck	(				(	Х	)	
☐ Commerci	iai USE		,	with Attached	Garage				(	X	)	
				se w/ (□ sanitary,					ies) (	Х	)	
***				lome (manufacture					_ (	X	)	
☐ Municipal	Use			/Alteration (explain					_ (	X	)	
				y Building (explain)		(ovalais)			- (	X	)	
÷				y Building Additio	III/ MILEI ALION	(explain)	-		- '	X	1	
1				se: (explain)		-			- (	X	)	
- Dr			Other: (e	nal Use: (explain) _	ORT TE	en	REUTO	4		77×34	1 /	258
4				OBTAIN A PERMIT or S				WILL RESIDE IN D		9 7 7	. 17	, _
(are) responsible for t	is application	accuracy o	ny accompanyin f all information	g information) has been ex I (we) am (are) providing an I (are) providing in or with	amined by me (us) a nd that it will be reli	and to the be ed upon by E	est of my (our) knowle Bayfield County in det	dge and belief it is true ermining whether to is	e, correct an ssue a permi	it. I (we) further acce	ot liability w	hich may be a
result of Bayfield Cou	unty relying o	ii tilis iiiioii					1			1 1	/	/
property at any reaso	unty relying o	r the purpo	se of inspection			Section .	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6.5	V 10 40 W	1/	17/	7-77-7
property at any reaso	unty relying o	r the purpo	se of inspection		or letter(s) of a	uthorizatio	on must-accompa	ny this application	<u>)</u>	Date 6/6	17/0	2022
property at any reaso	unty relying o onable time fo ultiple Own	r the purpo	on the Deed	All Owners must sign	of letter(s) of au	uthorizatio		ny this application		Date 6/6		

CPSUF W 5-482/ Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1)Show Location of: Show / Indicate: (2)

**Proposed Construction** 

Fill Out in Ink - NO PENCIL

(3)

North (N) on Plot Plan Show Location of (\*):

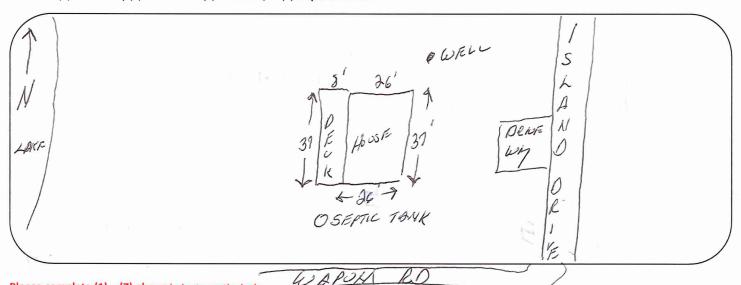
(4)Show:

(\*) Driveway and (\*) Frontage Road (Name Frontage Road) All Existing Structures on your Property

(5)Show: (6)Show any (\*): (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(7)Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Setback Measurements			Description	Setb Measure	
85	Feet		Setback from the Lake (ordinary high-water mark)	245	Feet
52	Feet		Setback from the River, Stream, Creek		Feet
			Setback from the Bank or Bluff		Feet
35	Feet				
100	Feet		Setback from Wetland		Feet
235	Feet		20% Slope Area on the property	☐ Yes	□,No
5-2	Feet		Elevation of Floodplain		Feet
10	Feet		Setback to Well	10'	Feet
251	Feet				-
	Feet				
	85 52 35 706 235	Measurements  85 Feet 52 Feet 700 Feet 235 Feet 52 Feet 707 Feet 708 Feet	Measurements  85 Feet  52 Feet  706 Feet  235 Feet  706 Feet  707 Feet  708 Feet	Measurements  Setback from the Lake (ordinary high-water mark)  Setback from the River, Stream, Creek  Setback from the Bank or Bluff  Feet  Setback from Wetland  Setback from Wetland  Setback from Wetland  Setback from Setback from Setback from Setback from Wetland  Setback from Wetland  Setback from S	Measurements  Setback from the Lake (ordinary high-water mark)  Setback from the River, Stream, Creek  Setback from the Bank or Bluff  Setback from Wetland  Setback from Wetland

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be narked by a licensed surveyor at the owner's expense.

#### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	67567	# of bedrooms: 2	Sanitary Date: 5-22-0			
Permit Denied (Date):	Reason for Denial:					
Permit #:	Permit Date:		EFFORM PART			
Is Parcel a Sub-Standard Lot Sparcel in Common Ownership Structure Non-Conforming Structure Non-	ious Lot(s)) 💆 No	Mitigation Required Mitigation Attached	Yes No	Affidavit Required ☐ Yes ☐ Ye		
Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:		Previously Granted by  Yes No	/ Variance (B.O.A.)	#:		
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No		Were Property Line	es Represented by Owner Was Property Surveyed	Yes		
Inspection Record: No Issues	<b>(</b> )	1	A. magazin	Zoning District (R-1) Lakes Classification (3)		
Date of Inspection:  Condition(s): Town, Committee or Board Conditions Atta  Herium of 2 bedroom/s/cg,  Maintain license with Public				Date of Re-Inspection:		
Signature of Inspector:				Date of Approval: 8/9/2		
Hold For Sanitary: 🗆 Hold For TBA: 🗆 _	Hold For Affi	davit: 🗆	Hold For Fees: 🗌	_		



JUL 14 2022

Bayfield Co.
Planning and Zoning Agency

## **Short Term Rental Permit Authorization Form**

1, Kelby & Whitny Sundquist	authorize Area 56, LLC doing
, ,	represent me in regard to obtaining permits and
information on my property located at 5594	5 Island Dr.
in the Town of <u>Prayrus</u> in th	e County of Bayfield, State of Wisconsin.
Property Owner's Contact Information:	
Phone: 701-680-3942 Emailing Address: 2003 Dunedin Ave 1	ail: Wjacobson 123@gmail.com
Mailing Address: 2003 Dunedin Ave, 1	Juluth, MN 55803
White Sindquist	4/1/22
Property Owner's Signature	Date
Area 56, LLC dba North Country Vacation Rentals a	authorizes Karl Kastrosky to represent us on behalf of
Kelby+Whitney Sunguist	in regard to the Bayfield County
Zoning Property Use Permit.	
Property Address: 55945 Island Drive	in the Town of BCINES
in the County of Bayfield, State of Wisconsin.	
Co-Owner Area 56, LLC	<u>(0/1/2023</u> Date

43520 Kavanaugh Road, PO Box 610, Cable, WI 54821 northcountryvacationrentals.net • info@northcountryvacationrentals.net 715.798.2252



RECEIVED

All And Tally Services and Zolong Special

# TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

Residence in Ag-1 or F-1; Shoreland Grading; Short-Term Rental (1 unit); Signage; RV Ext

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department P.O. Box 58 – Washburn, WI 54891 Phone – (715) 373-6138 Fax – (715) 373-0114

e-mail: zoning@bayfieldcounty.wi.gov

Website: www.bayfieldcounty.wi.gov Date Zoning Received: (Stamp Here) RECEIVED

JUN 27 2022

Bayfield Co.

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 ½ x 14) [front/back]. This is a Class A special use request. Note: The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. Ask Town if you should be present at their meeting(s).

Property Owner Kelby talhitney Sunguist Contra	ctor
Property Address 55945 TS/and DR Author	ized Agent Kastrosky
Barnes WI Agent's	s Telephone 7/5-580-0/57
Telephone 701-680-3942 Writter	Authorization Attached: Yes (+) No ( )
Accurate Legal Description involved in this request (specify only the	property involved with this application)
1/4 of 1/4, Section <u>/</u> %_, Township <u>45</u> _N., Rang	ge 09 W. Town of Barnes
Govt. LotLot 25 _ Block Subdivision Potawas	tomi Estates csm#
Volume Page of Deeds Tax I.D# 3935 [2030	R-584291 1492 Acreage 1.37
Additional Legal Description: Lot 26 TALD 3926 Lacok-	58429114937 AC: 684
Applicant: (State what you are asking for) Zoning District:	
Short Term Rental Permit - 2	
We, the Town Board, TOWN OF Barnes	, do hereby recommend to
We, the Town Board, <i>TOWN OF Barnes</i> ☐ Table	, do hereby recommend to
	☐ Disapproval
☐ Table	☐ Disapproval re and/or Land Use Plan: ☐ Yes ☐ No
☐ Table ☐ Approval  Have you reviewed this for Compatibility with the Comprehensive  Township: (In detail clearly state Town Board's reason for recommendation)	☐ Disapproval  re and/or Land Use Plan: ☐ Yes ☐ No  adation of tabling, approval or disapproval)
☐ Table ☐ Approval  Have you reviewed this for Compatibility with the Comprehensive	☐ Disapproval  re and/or Land Use Plan: ☐ Yes ☐ No  adation of tabling, approval or disapproval)
☐ Table ☐ Approval  Have you reviewed this for Compatibility with the Comprehensive  Township: (In detail clearly state Town Board's reason for recommendation)	☐ Disapproval  re and/or Land Use Plan: ☐ Yes ☐ No  adation of tabling, approval or disapproval)
☐ Table ☐ Approval  Have you reviewed this for Compatibility with the Comprehensive  Township: (In detail clearly state Town Board's reason for recommendation)	Disapproval re and/or Land Use Plan: Yes No Indation of tabling, approval or disapproval)  Hic Y Sethacks ok
Table  Have you reviewed this for Compatibility with the Comprehensive  Township: (In detail clearly state Town Board's reason for recommentation in with land use plan - September 1988)	Disapproval re and/or Land Use Plan: Yes No Indation of tabling, approval or disapproval)  Hic Y Sethacks ok  Signed:
Table  Have you reviewed this for Compatibility with the Comprehensive  Township: (In detail clearly state Town Board's reason for recomment  Fits in with land use plan - September 1. The FOLLOWING MUST BE INCLUDED WITH THIS FORM:  1. The Tabled, Approval or Disapproval box checked	Disapproval  re and/or Land Use Plan: Yes No  ndation of tabling, approval or disapproval)  Hic Y Setbacks ok  Signed: Chairman:
Table  Have you reviewed this for Compatibility with the Comprehensive  Township: (In detail clearly state Town Board's reason for recomment  Fits in with land use plan - September 1. The FOLLOWING MUST BE INCLUDED WITH THIS FORM:  1. The Tabled, Approval or Disapproval box checked  2. The Town's reasoning for the tabling, approval or disapproval	Disapproval  re and/or Land Use Plan: Yes No  ndation of tabling, approval or disapproval)  Hic Y Sethacks ok  Signed: Chairman: Supervisor:
Table  Have you reviewed this for Compatibility with the Comprehensive Township: (In detail clearly state Town Board's reason for recommendate Fits in with land use plan - September 1. The FOLLOWING MUST BE INCLUDED WITH THIS FORM:  1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval 3. The form returned to Zoning Department not a copy or fax  ** NOTE:  Receiving Town Board approval, does not allow the start	Disapproval  re and/or Land Use Plan: Yes No  ndation of tabling, approval or disapproval)  Hic Y Sethacks ok  Signed: Chairman: Supervisor: Supervisor:
Table  Have you reviewed this for Compatibility with the Comprehensive Township: (In detail clearly state Town Board's reason for recommendate Fits in with land use plan - September 1. The FOLLOWING MUST BE INCLUDED WITH THIS FORM:  1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval 3. The form returned to Zoning Department not a copy or fax  ** NOTE:	Disapproval  re and/or Land Use Plan: Yes No  ndation of tabling, approval or disapproval)  Hic Y Sethacks ok  Signed: Chairman: Supervisor: Supervisor: Supervisor: Supervisor:

#### **LUPC Minutes**

Land Use Plan Commission Meeting Meeting called to order at 4:00 on June 14, 2022

Absent: Bill Webb, Diane Rupnow

In Attendance: Jeff Johnson, Greg Strasser, Seana Frint Karl Kastrosky to represent Sundquist.

Public comment session: K Kastrosky updated on possible future of trailer park. Nothing set in stone yet but owners are hoping to re-do water/septic, clean-up/tear down and put up a few single housing units to rent and/or mini-storage. Ideas are still being debated.

Peter and Kelly Thompson 3557 Twin Bay Rd Class A Special Use application for short term rental. Motion by Johnson to approve. 2nd by Frint. Discussion: Fits in with land use plan. Septic and setbacks ok. County is getting a little fussier about applications being 100% filled out. Box with question "Are wetlands present" not checked so the county may send the application back to be done again. Motion carries.

Kelby and Whitney Sundquist 55945 Island Dr Class A Special Use application for short term rental. Motion to approve by Johnson. 2nd by Frint. Septic and setbacks ok. Fits in with land use plan. Motion carries.

Meeting adjourned. 4:20

RECEIVED

JUN 27 2022

Bayfield Co.
Planning and Zoning Agency

## Bayfield County, WI



Bayfield County Land Records Department https://maps.bayfieldcounty.wi.gov/BayfieldWAB/

STANDERS SONING ASSESSMENT OF THE STANDERS ASSES

#### **TOWN OF BARNES TREASURER**

JUDY BOURASSA 3360 CO HWY N

BARNES WI 54873

Phone: (715) 795-2782

#### STATE OF WISCONSIN - BAYFIELD COUNTY **REAL ESTATE PROPERTY TAX BILL FOR 2021**

#### RECEIVED

JUL 14 2022

Bayfield Co.
Planning and Zoning Agency

PAYMENTS should reference: Tax ID: 3926

**DOCUMENT RECORDING**, or anything Else should reference:

04-004-2-45-09-18-1 00-260-23000

Alternate/Legacy ID: 004-1308-01 000

Ownership: WHITNEY H & KELBY J SUNDQUIST

Important: Be sure this covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

<u>Property Description / Location of Property</u>

Site Address:

Acreage: 0.000

N/A

Description: POTAWATOMI ESTATES LOT 26 IN DOC 2020R-

Real Estate Tax:

Lottery Credit:

First Dollar Credit:

Net Real Estate Tax:

1493

Please include self-addressed, stamped envelope for return receipt.

WHITNEY H & KELBY J SUNDQUIST

Please inform your treasurer of any billing address changes

2003 DUNEDIN AVE DULUTH MN 55803

2020R-584291 **Document:** Assessed Value **Net Assessed Value** Average Land **Improved** Total **Assessment Ratio** Rate (Does NOT reflect lottery \$15,200 \$0 \$15,200 0.92671 or first dollar credit) 0.009676021 **Estimated Fair Market Value** An "X" means unpaid School taxes reduced by **Improved** <u>Total</u> prior year taxes. school levy tax credit. <u>Land</u> \$8.77 ¢16 400

\$10,400	ŞU	\$10,400				
	Es	timated Sta	ate Aids			% Tax
	All	ocated Tax	District	Ne	t Tax	<u>Change</u>
Taxing Jurisdiction		2020	<u>2021</u>	202	0 2021	
COUNTY		125,995	135,560	65.4	9 66.33	1.3
TOWN OF BARNES		400,212	408,212	38.4	0 39.66	3.3
SCHL-DRUMMOND		198,600	208,048	36.8	9 35.82	-2.9
TECHNICAL COLLEGE		261,719	278,026	5.7	5.26	-8.5

**Total Due:** 147.07 For full payment pay to TOWN OF BARNES treasurer by January 31, 2022

147.07

-0.00

-0.00

147.07

<u>Warning</u>

If not paid by due dates, installment option is lost and total tax is delinquent and subject to interest and if applicable, penalty. (See reverse)

986,526	1,029,846	146.53	147.07	0.4
		0.00	0.00	0.0
		0.00	0.00	0.0
		146.53	147.07	0.4
	986,526	986,526 1,029,846	0.00 0.00	0.00 0.00 0.00 0.00

Pay 1st Installment Of:

73.54 Pay 2nd Installment Of:

73.53

Or Pay Full Payment Of: by January 31, 2022

147.07

by July 31, 2022

Amount enclosed:

WHITNEY H & KELBY J SUNDQUIST Tax ID: 3926 (004)

Make payment payable and mail to: **TOWN OF BARNES TREASURER** JUDY BOURASSA

3360 CO HWY N BARNES WI 54873

Include this stub with your payment

Or to Pay Online see Credit Card Payments on back

Amount enclosed:

WHITNEY H & KELBY J SUNDQUIST Tax ID: 3926 (004)

Make payment payable and mail to: **BAYFIELD COUNTY TREASURER** 

JENNA GALLIGAN PO BOX 397 WASHBURN WI 54891

Include this stub with your payment

Section and votal union of the control of the contr

**TOWN OF BARNES TREASURER** 

JUDY BOURASSA

3360 CO HWY N BARNES WI 54873

Phone: (715) 795-2782

#### STATE OF WISCONSIN - BAYFIELD COUNTY **REAL ESTATE PROPERTY TAX BILL FOR 2021**

PAYMENTS should reference: Tax ID: 3925

**DOCUMENT RECORDING**, or anything Else should reference:

**PIN:** 04-004-2-45-09-18-1 00-260-22000

004-1307-10 000 Alternate/Legacy ID:

Ownership: WHITNEY H & KELBY J SUNDQUIST

JUL 14 2022

RECEIVED

Bayfield Co.
Planning and Zoning Agency

Important: Be sure this covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

**Property Description / Location of Property** 

Site Address:

55945 ISLAND DR

Description: POTAWATOMI ESTATES LOT 25 IN DOC 2020R-584291

3.3 option is lost and total tax is delinquent

-2.9 and subject to interest and if applicable,

penalty. (See reverse)

1492

WHITNEY H & KELBY J SUNDQUIST 2003 DUNEDIN AVE

DULUTH MN 55803

Please include self-addressed, stamped envelope for return receipt.

Acreage: 0.000

235.86

213.07

31.31

Please include self-addres	seu, stampeu	envelope roi	return receipt.	ici eage. 0.000		
Please inform your treasu	irer of any billi	ng address c	hanges.	Document: 2	020R-584291	
Assessed Value			Average	Net Assessed Value	Real Estate Tax:	874.72
<u>Land</u>	<u>Improved</u>	<u>Total</u>	<b>Assessment Ratio</b>	Rate	First Dollar Credit:	-20.39
_				(Does NOT reflect lottery	Lottery Credit:	-0.00
\$14,400	\$76,000	\$90,400	0.92671	or first dollar credit)	Net Real Estate Tax:	854.33
		, ,		0.009676021	Total Due:	854.33
Estimated Fair Market Value An "		An "X" means unpaid	School taxes reduced by			
<u>Land</u>	<b>Improved</b>	<u>Total</u>	prior year taxes.	school levy tax credit.	For full payment pay to TOWN	N OF BARNES
				\$52.15	treasurer by	
\$15,500	\$82,000	\$97,500	<u> </u>	1	January 31, 202	2
-	E	stimated St	ate Aids	% Tax		
Allocated Tax District				et Tax Change	Warning	
Taxing Jurisdiction		2020	<u>2021</u> <u>203</u>	<u>2021</u>	If not paid by due dates	installment
COUNTY		125.995	135.560 389.	47 394.48 1.3	I flot paid by due dates,	II ISCAIII ICITE

228.37

219.42

34.22

Totals First Dollar Credit	986,526	1,029,846	871.48 21.43	874.72 20.39	0.4 -4.9

135,560

408,212

208,048

278,026

400,212

198,600

261,719

Lottery & Gaming Credit 0.00 0.00 0.0 850.05 854.33 0.5 Net Property Tax

Pay 1st Installment Of:

427.17 Pay 2nd Installment Of:

427.16

Or Pay Full Payment Of: by January 31, 2022

854.33

by July 31, 2022

COUNTY

TOWN OF BARNES

SCHL-DRUMMOND

TECHNICAL COLLEGE

WHITNEY H & KELBY J SUNDQUIST

Tax ID: 3925 (004)

Make payment payable and mail to: TOWN OF BARNES TREASURER

JUDY BOURASSA 3360 CO HWY N

BARNES WI 54873

Include this stub with your payment

Or to Pay Online see Credit Card Payments on back

Amount enclosed:

WHITNEY H & KELBY J SUNDQUIST

Tax ID: 3925 (004)

Make payment payable and mail to: **BAYFIELD COUNTY TREASURER** 

JENNA GALLIGAN PO BOX 397

WASHBURN WI 54891

Include this stub with your payment

SECENE Management

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE – X Sanitary – 367567 SPECIAL – A (Tn of Barnes-6/21/2022) CONDITIONAL – BOA –

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-	0195		Issue	d To:	WHI	TNEY H 8	& KEL	BY J	SUND	QUIS	ST_					
Locatio	n:	1/4	of		1/4	Section	<b>18</b> Towns	ship	45	N.Range	е !	9	W.	Town o	f bar	nes	
Gov't Lo	t		Lot	25		Block		Subd	ivision	POTA	AWA <sup>.</sup>	ΤΟΙ	WI ES	STATES	i	CSM#	
For: (	Residential Use in R-1 zoning district For: (1-Unit) Short Term Rental of existing 2-Story Residence  (Disclaimer): Any future expansions or development would require additional permitting.  Condition(s): To be rented as a 2 – bedroom/sleeping area residence. Contact County Health Department																
		for pe	ermits	s. Tow	n/Sta	ate/DNR	permits n	nay b	e req	uired.	Perm	it r	on-t	ransfera	able	if prop	perty is
NOTE:			•		date o	f issuance if	the authorize	ed cons	tructior	1			Т	racy Po	oler	, AZA	
work or land use has not begun.				not ha mada							Α	uthorized	l Issu	ing Offic	cial		
Changes in plans or specifications shall n This permit may be void or revoked if any to have been misrepresented, erroneous,			y of the appli	cation inform			,			8	-22-202	2					
	•	•				y performano s are violated	ce conditions	are not	:					Date	е		

#### SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

Authorized Agent:

Address to send permit 1790 Krenz

#### **APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN**

## Pate Stamp (Received)

JUL 25 2022

Bayfield Co.
Planning and Zoning Agency

Permit #:	22-0188
Date:	8-22-220
Amount Paid:	15 100 8/22/22
Other:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

DO NOT START C						TO APPLICANT.	rigir	al App	lication <u>N</u>	//UST be	submit	tted F	ILL OUT IN IN	ık ( <mark>N</mark>	PENCIL)		
TYPE OF PERMIT	REQUESTE	D +	■ LANE	USE [	SANI	TARY   PRIVY		CONDIT	IONAL US	E 🗆 SI	PECIAL	USE 🗆	B.O.A. □ (	OTHER			
Owner's Name:				40.0	Mai	ling Address:		2 /		ity/State/		6	74873	Teleph	one:		
Address of Proper	MICK		1		1	790 Kren	21	50	(	Sola	2 S	orin	95 WI	715-	795-2327		
1790 Kr		RJ	P 40		City/State/Zip: Barnes WI 54873						,	Cell Ph	ione:				
Email: (print clea		1)64			12911183 WI 37013							218-	341-3910				
Contractor:				7/11		, ,											
contractor:					Con	tractor Phone:		Plumb	er:					Plumb	er Phone:		
Authorized Agent	: (Person Sign	ing Applic	ation on behalf	f of	Age	nt Phone:		Agent	Mailing Ac	Idress (incl	ude City	/State/7in	77.01.				
Owner(s))			1			P				(		, o cace, 2.p	,		n Authorization red (for Agent)		
PROJECT	Part i	2	(Use Tax Sta	*************		Tax ID#						Recorde	d Document: (S	howing	Ownership)		
LOCATION	Legal Desci	iption.	(USE TAX Sta	tement)		2637											
1/4,	1/4	Gov	/'t Lot	Lot(s)	CSM		SM Do	oc#	Lot(s)	# BI	ock #	Subdivis	ion:				
				6	-	1086-752		Re-									
Section 19	, Townsl	nip <u>4</u>	2 N, Ran	ge <u>09</u>	w	Town of:	?	-10-				Lot Size,	200:4	Acr	eage / Q D		
								110							1.42		
						Stream (incl. Intermitte		Dist	ance Stru	cture is fr	om Sho		Is your Pro	-	Are Wetlands		
☐ Shoreland	☐ Shoreland Creek or Landward side of Floodplain?  Is Property/Land within 1000 feet or					If yescontinue —	<u>→</u>	_				feet	in Floodp Zone?		Present?		
	A IS Pro	perty/La	and within 1	.000 feet o	t Lake,	Pond or Flowage  If yescontinue —		Dist	ance Stru	cture is fr	om Sho		☐ Ye:	s	Yes		
□ Non-		_		———		n yes continue		1=			ره	feet	≥ No	)	⊠ No		
Shoreland																	
Value of T	Control of the Contro	3000 Car						1 7314	ere a la			da es					
Value at Time of Completion								To	otal # of			What T	ype of		Type of		
* include		Projec	t		ject	Project	7-14	be	drooms				ary System(s)		Water		
donated time				# of S	tories	es Foundation on Is on t						roperty or		on			
& material	□ New	Constr	uction	□ 1 C+		□ <b>P</b>	RIS		roperty		-		e property?		property		
				☐ 1-St		□ Basemen	ī		1 1		nicipal		- ··c -	☐ City			
	☐ Addi	tion/Al	teration	Lof	•	☐ Foundation	on		2	gat (IVE	w) San	illary Sp	ecify Type:		<b>⊠</b> Well		
\$ 3,000	Con	orcion		_ 2.C+			-			X San	itary (I	Exists) St	pecify Type:	☐ City			
	☐ Conv			☐ 2-St	ory	□ Slab		×	3				Jeeny Type.				
			isting bldg)	<u> </u>		_ × Ground	_						/aulted (min 2	200 gall	on)		
	☐ Run :		ess on			Use			None			w/service	contract)				
	Prop					✓ Year Rou	nd				npost 1	Toilet					
	E 376					Ц		1940		□ Not	ie						
Existing Struct	ure: (if add	lition, alt	eration or bu	siness is be	ing app	lied for) Length	ı:		-	Width:		(a) (b)	Heigh	nt:			
Proposed Con	struction:	(overa	all dimension	ns)		Length	ı:			Width:			Heigh	nt:			
D		,			103/61		Mey						William Programme	Sec. 20	Square		
Proposed	Use	1	A-10.19		h/h/k	Proposed S	truct	ure				1	Dimensions		Footage		
			Principal	Structure	e (firs	t structure on pro	perty	)	_11			(	Х	)			
			Residenc			nting shack, etc.)						(	Х	)			
🕅 Residenti	al Use			with L								(	Х	)			
				with a								(	Х	)			
_				with (								(	X	)			
				with a								(	Х	)			
	ial Use			with (			- 60					(	Х	)			
			Develope			ed Garage						-(	Х	)	4.11		
						y, <u>or</u> Sleeping qu					facilitie	es) (	Х	)	- 1 -		
n V. V.			IVIODIIE H	/Altania	nufacti	red date)		-	-	1		_ (	Х	)			
☐ Municipa	I Use		Addition	Aiteratio	n (exp	olain)		10.5				. (	Х	)	, = _,, -		
	Accessory Building (explain)							(	X	)							
	☐ Accessory Building Addition/Alteration (explain)								(	X	)	~ .					
									X	)							
			Condition	- 3			,					11	4 × 12	)	48		
20.7%	147	×	Other: (ex	xplain) 🗘	eck	and dec	40	add	ition	) 57	girs	5 (	5 × 24	)	120		
2.5	200 000		FAILURE TO	OBTAIN A F	ERMIT	or STARTING CONSTRU	CTION	WITHOU	T A PERMIT	WILL RESU	LT IN PE	NALTIES					
(are) responsible for	the detail and	accuracy of	ny accompanyin all information	g information I (we) am (are	has bee	n examined by me (us) and	to the	best of my	(our) knowle	dge and belie	f it is true,	, correct and	I found & water and	10 . 1 . 110.			
result of Bayfield Co property at any reason	unity relying of	this inform	nation i (we) am	i (are) providir	ng in or w	rith this application. I (we)	consent	to county	officials char	ged with adn	ninistering	county ordin	ances to have acces	ot liability ss to the a	wnich may be a above described		
Owner(s):	12m	A Section of the sect	TUINA										8 1	1	2-2		
	ultiple Owne	ers listed	on the Deed	All Owners	must s	ign <u>or</u> letter(s) of auth	norizat	ion mus	t accompa	ny this ann	lication	D	ate <u>8-14</u>				
(in circle die ivi						1-1-1-00				The second							

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

MT 54873 Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Date \_

#### In the box below: Draw or Sketch your Property (regardless of what you are applying for)

Show Location of: (1)

**Proposed Construction** 

Show / Indicate: (2)

Show Location of (\*):

North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(4)Show:

(3)

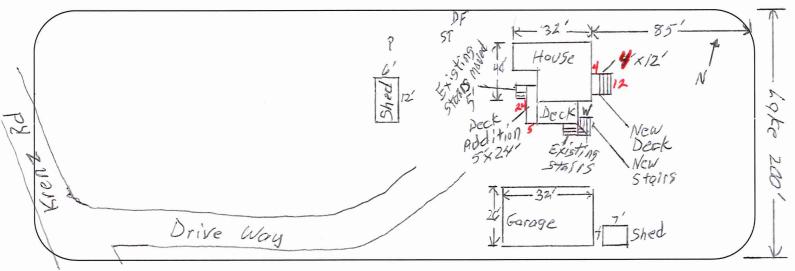
(\*) Driveway and (\*) Frontage Road (Name Frontage Road)

(5)Show: All Existing Structures on your Property

(6)Show any (\*): (\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

Show any (\*): (\*) Wetlands; or (\*) Slopes over 20% (7)



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

#### (8) Setbacks: (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements	
Setback from the Centerline of Platted Road	3 <i>44</i> Feet		Setback from the <b>Lake</b> (ordinary high-water mark)	So Feet	
Setback from the Established Right-of-Way	Feet		Setback from the River, Stream, Creek	Feet	
			Setback from the Bank or Bluff	Feet	
Setback from the <b>North</b> Lot Line	76 Feet				
Setback from the <b>South</b> Lot Line	90 Feet		Setback from Wetland	Feet	
Setback from the West Lot Line	3 <b>9</b> 0 Feet	117	20% Slope Area on the property	☐ Yes 🥱 No	
Setback from the <b>East</b> Lot Line	77 Feet		Elevation of Floodplain	Feet	
Setback to Septic Tank or Holding Tank	42 Feet	ing i	Setback to Well	∃ Feet	
Setback to <b>Drain Field</b>	34 Feet				
Setback to Privy (Portable, Composting)	59 Feet				

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

#### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

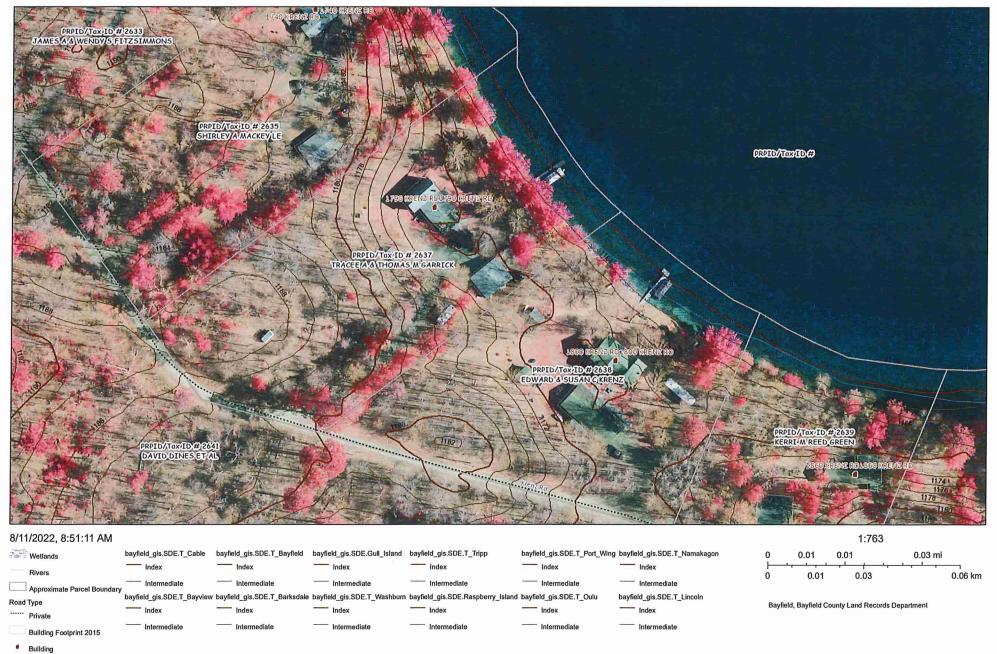
All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	#	# of bedrooms:	Sanitary Date:					
Permit Denied (Date):	Reason for Denial:								
Permit #:	Permit Date:								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Fused/Contiguation of the Conforming of the C	uous Lot(s)) 🗷 No	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached Yes No					
Granted by Variance (B.O.A.)  ☐ Yes ✓No Case #:		Previously Granted by  Yes No	Variance (B.O.A.)  Case	#:					
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No		Were Property Line	s Represented by Owner Was Property Surveyed	Yes   No   No					
Inspection Record:				Zoning District (R-/ )					
	are temporary remarks	. 1 0		Lakes Classification ( 2 )					
Date of Inspection: 8/16/22	Inspected by:	July		Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Atta		No they need to be attac	ched.)						
- Build as proposed									
- builb as proposed -bet upc inspections if required									
Signature of Inspector:				Date of Approval: 8/17/32					
Hold For Sanitary:  Hold For TBA:	Hold For Affi	davit: 🗌 I	Hold For Fees: 🗌						

# Bayfield County, WI



Bayfield County Zoning Application https://maps.bayfieldcounty.wi.gov/ZoningWAB/

			x = x
	V		
	*		
	, c		

# RECEIVED '

# Bayfield County Impervious Surface Calculation 29 2022





These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high-water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

	Owner / Applicant
Owner's Name	Tom Garrick
Site Address	1790 Krenz Rd
City / State Zip	Solon Springs WI 54873
Mailing Address	1790 Krenz Rd
City / State / Zip	Solon Springs WI 54873
Phone(s)	(715) 795-2327 Cell 218-341-3910
Email Address	tmagrickle hotmail.com

Accura	<u>te</u> Legal Des	cription inv	olved in <u>th</u>	is request (sp	ecify only the	property in	volved with this ap	plication)
PROJECT LOCATION	Legal <u>Desc</u> (Use Tax St		Tax ID #:	2637	Lot Size 200x425	Acreage	Zoning District	Lakes Class
	-1 26 61	1/4	1/4	Section	Township	Range	Town of	130 -

u/forms/impervioussurface © May2012 @-Sept2016; Jan2021

Date of Approval:	Signature of Inspector:
ON Sey 🗆	
Stormwater Sanagement Plan Required:	Condition(s):
Zoning District $(X-/)$ Lakes Classification $(2)$	·
	Inspection Record:
Date of Inspection: 8/16/22	lssuance Information (County Use Only)
%0E @	Total square footage of additional impervious surface allowed: @ 15%
% HO	c. Percentage of impervious surface area: 100 x (b)/a =



# Impervious Surface(s)

Impervious Surface Item	Dimension(s)	Square Footage
Existing House	24 x 24 x 16 x 32	1088
Existing Garage	26 x.37	832
Existing Porch / Covered Porch		
Existing Porch #2 / Covered Porch #2		
Existing Deck	12 x 20	240
Existing Deck #2	4 × 4	160
Existing Sidewalk(s), Patio(s)	30" x98 8 x19	470,7
Existing Storage Bldg	6×12	72
Existing Shed	7×7	49
Existing Accy: (explain)		
Existing Carport		
Existing Boathouse		
Existing Driveway	13'x 128 + 24 x 47	2792
Existing Road (Name)		
Existing Other (explain) Apron Eggrage)	18 x 18	324
Existing Other (explain)		
Proposed House		
Proposed Garage		
Proposed Addition (explain)		
Proposed Addition (explain)		
Proposed Porch / Covered Porch		
Proposed Porch #2 / Covered Porch #2		
Proposed Deck #1	4X12	48
Proposed Deck #2	5 x 24	120
Proposed Balcony		
Proposed Sidewalk(s), Patio(s)		
Proposed Storage Bldg		*
Proposed Shed		
Proposed Carport	,	
Proposed Accy: (explain)		
Proposed Boathouse		
Proposed Driveway		£
Proposed Road (Name)		
Proposed Other (explain)		
Proposed Other (explain)		
Total:		5981,7

a.	Total square footage of lot:		011-12	
L	Total immediant confers book	59817	Banner (City)	

### Real Estate Bayfield County Property Listing

Today's Date: 8/11/2022

**Property Status: Current** 

Created On: 3/15/2006 1:14:48 PM

Description

Tax ID:

Updated: 8/9/2012

2637

PIN: 04-004-2-45-09-19-4 05-006-30000

Legacy PIN: Map ID:

Municipality:

(004) TOWN OF BARNES

STR: S19 T45N R09W

Description: PAR IN LOT 6 IN V.1086 P.752 (SUB TO

1.954

004117207000

EASE V.769 P.293) 1054D

Recorded Acres: Calculated Acres:

Lottery Claims: 1 First Dollar: Yes

Zoning: (R-1) Residential-1

FSN: 104

Tax Districts Updated: 3/15/2006 1 STATE 04 COUNTY 004 TOWN OF BARNES 041491 SCHL-DRUMMOND 001700 TECHNICAL COLLEGE

Recorded Documents WARRANTY DEED

Date Recorded: 7/19/2012

CONVERSION

Date Recorded: 3/15/2006

2012R-544841 1086-752

Updated: 8/9/2012

310-27;448-382;766-583

🎎 Ownership

Updated: 8/9/2012

SOLON SPRINGS

0.0%

**Billing Address:** TRACEE A & THOMAS M **GARRICK** 

1790 KRENZ RD SOLON SPRINGS WI 54873 **Mailing Address:** 

TRACEE A & THOMAS M GARRICK

1790 KRENZ RD

SOLON SPRINGS WI 54873

187,500

Fite Address \* indicates Private Road

TRACEE A & THOMAS M GARRICK

1790 KRENZ RD \* **BARNES 54873** 

Property Assessment Updated: 10/4/2016 2022 Assessment Detail Code Acres Land Imp. **G1-RESIDENTIAL** 1.950 89,700 97,800 2-Year Comparison 2021 2022 Change Land: 89,700 89,700 0.0% Improved: 97,800 0.0% 97,800

187,500

Property History

N/A

Total:

		7-	
		τ	

# Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0188	Issued To:	TRACE	EA&THO	MASI	M GARRIC	CK				
PAF	R IN LOT 6 IN V.10	86 P.752									
Locatio	on: 1⁄4	of	1/4	Section	19	Township	p 4	<b>5</b> N.	Range	9	W.
	Town of					-					
Gov't Lo	ot Lo	t	Block	S	ubdivisi	on			CSM#		
	ential Structure in cessory: [ deck ar			x 24') = 17	73	sq. ft.]	Heigh	t of 3'			
02.0		claimer): Any		•					mitting.		
ou are respon	tion(s): Not for Hulpermit is reasonable for complying with state and feder f construction that violates the law or other	equired prior	r. Must m	neet and m	aintair Wetlands that	n setback	s inclusion with open wat	uding er can be diff contact a dep	eaves and ficult to identify. Failurent of natural res	d overl re to comply m ources service o	nangs. ay result in removal enter (715) 685-2900
OTE:	This permit expires one work or land use has no	•	issuance if th	ne authorized o	onstructi	on		Т	racy Pool	er, AZ	4
								Α	uthorized Is	suing Of	ficial
	Changes in plans or spe This permit may be voice										
	to have been misrepres	ented, erroneous,	or incomplet	e.				8	/22/2022		
	This permit may be voice completed or if any prof		•	conditions are	not				Date		

#### SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

**Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

#### **APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN**

#### Rate Stamp (Received)

JUL 19 2022

Bayfield Co.

Permit #:	22-0/89 ENT
Date:	8/22/22
Amount Paid:	204,00
Other:	
Refund:	

FILL OUT IN INK (NO PENCIL)

Is your Property

Zone?

☐ Yes

feet

Are Wetlands

Present?

☐ Yes

X No

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

 $\hfill \square$  Is Property/Land within 300 feet of River, Stream (incl. Intermittent)

s Property/Land within 1000 feet of Lake, Pond or Flowage

Craek or Landward side of Floodplain?

Shoreland

DO NOT START CONSTRUCTION <u>UNTIL ALL PERMITS HAVE BEEN ISSUED</u> TO APPLICANT. Original Application MUST be submitted

TYPE OF PERMIT REQUESTED - LAND USE - SANITARY - PRIVY - CONDITIONAL USE - SPECIAL USE - B.O.A OTHER								
Owner's Name:	Mailing Address: City/State /7in.	Telephone:						
ALFRED R-ELIZABE++1	8260 MANNIK Rd IRON RIVER. WI.	715-372-						
Address of Property: MANNIK	City/State/7in:	4678						
1990 Krenz 20	IRON RIVER	Cell Phone: 8/7						
Email: (print clearly)		0844						
Carnez a Cheonet. Net		0041						
Sign of the contract of the co	Contractor Phone: Plumber:	Plumber Phone:						
OULU LOG BUILDERS	715-372-4670							
Authorized Agent: (Person Signing Application on behalf of	Agent Phone: Agent Mailing Address (include City/State/Zip):							
Owner(s))		Written Authorization Required (for Agent)						
PROJECT	Tax ID# Recorded Document: (							
LOCATION Legal Description: (Use Tax Statement)	2634 200 R	507 116						
	A 55 7	JU1 110						
1/4 1/4	CSM Vol & Page CSM Doc# Lot(s) # Block # Subdivision:							
	V 745 1.196	,						
Section 19 Township 45 N. Range 9	Town of:	Acreage						
Section 77 , Township 75 N, Range	BARNES LOTSIZE	315						

If yes---continue -

If yes---continue -

Distance Structure is from Shoreline:

Distance Structure is from Shoreline :

□ Non-						
Shoreland		-1 " 11				
Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
X ·	New Construction	1-Story	☐ Basement	<b>1</b>	☐ Municipal/City	☐ City
510 000	☐ Addition/Alteration	☐ 1-Story + Loft	☐ Foundation	× 2	(New) Sanitary Specify Type:	Well
168,000	☐ Conversion	□ 2-Story	Slab	□ 3	Sanitary (Exists) Specify Type:	
-	☐ Relocate (existing bldg)			D	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	
	☐ Run a Business on		Use	□ None	□ Portable (w/service contract)	1
	Property		☐ Year Round	(B) (B)	☐ Compost Toilet	
					□ None	

Existing Structure: (if addition, alteration or business is being applied for)	Length:	Width:	Height:
Proposed Construction: (overall dimensions)	Length: 48	Width: 30	Height: 1(p

Proposed Use	1	Proposed Structure	ı	Dimensions	Square Footage
		Principal Structure (first structure on property)	(	X )	
		Residence (i.e. cabin, hunting shack, etc.)	(	X )	
☐ Residential Use		with Loft	(	X )	
- Residential OSC		with a Porch	(	X )	•
		with (2 <sup>nd</sup> ) Porch	(-	X )	
		with a Deck	(	x )	The state of
□ Commercial Use		with (2 <sup>nd</sup> ) Deck	(	X )	-
Commercial Ose		with Attached Garage	(	x )	
		<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	(	X )	
		Mobile Home (manufactured date)	(	X )	
☐ Municipal Use		Addition/Alteration (explain)	(	x )	
	X	Accessory Building (explain)	( 3	30 x 481	1640 304
	W	Accessory Building Addition/Alteration (explain)	(	x )	1810 31
		Special Use: (explain)	(	x )	
		Conditional Use: (explain)	(	X )	7.5
aller Artist		Other: (explain)	. (	X )	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described

property at any reasonable time for the purpose of inspection.		1	unity ordinances to have access to	the above desc
Owner(s):	alfred R. 11	Porinik	Date 7-19-	22
(If there are Multiple Owners listed on the Deed All Owners must sign or	letter(s) of authorization must	accompany this application)	Date 7 V V	<del></del>
Authorized Agents			and address of the second second	

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit Copy of Tax Statement If you recently purchased the property send your Recorded Deed

**Attach** 

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1) Show Location of:(2) Show / Indicate:

Proposed Construction

cate: North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(4) Show:

(3) Show Location of (\*): (\*) **Driveway** 

(5) Show:(6) Show any (\*):

(\*) Driveway and (\*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property
(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P)

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%

#### Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

#### (8) Setbacks: (measured to the closest point)

Description	Setback Measurements			Description	Setb Measure	
					4.5	
Setback from the Centerline of Platted Road	14/	Feet		Setback from the <b>Lake</b> (ordinary high-water mark)	270	Feet
Setback from the Established Right-of-Way	156	Feet	Ke.	Setback from the River, Stream, Creek	0	Feet
4)				Setback from the Bank or Bluff	0	Feet
Setback from the North Lot Line	500	Feet				
Setback from the <b>South</b> Lot Line	370	Feet		Setback from Wetland	0	Feet
Setback from the West Lot Line	21	Feet		20% Slope Area on the property	☐ Yes	No
Setback from the East Lot Line	130	Feet		Elevation of Floodplain	Ô	Feet
Setback to Septic Tank or Holding Tank	35'	Feet		Setback to <b>Well</b>	80	Feet
Setback to Drain Field	270'	Feet		X		
Setback to Privy (Portable, Composting)	NO	Feet				

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

#### (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

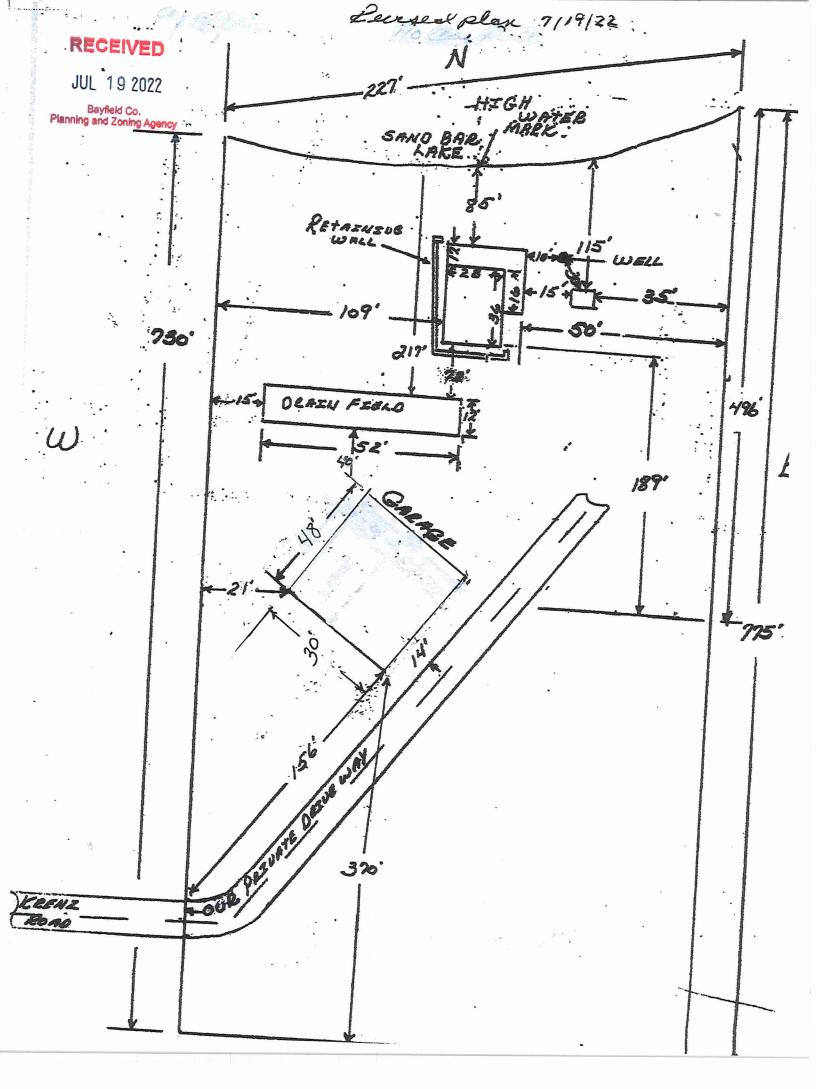
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

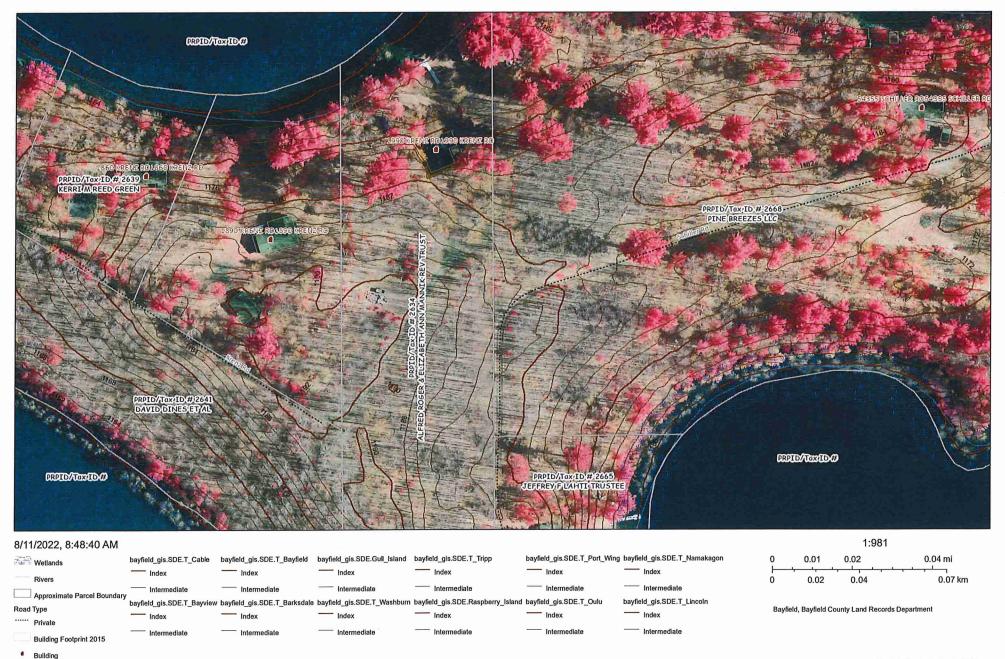
If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:			
Permit Denied (Date):		DOCK PATE PARTIES					
Permit #:	Permit Date:						
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Recor	ious Lot(s)) 💆 No	Mitigation Required Mitigation Attached	Yes No	Affidavit Required Affidavit Attached Yes No			
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by  ☐ Yes → No		e #:			
Was Parcel Legally Created Was Proposed Building Site Delineated  Yes No	Were Property Line	Yes					
Inspection Record: Replacing old Gard	igo	1.		Zoning District (R2) Lakes Classification (2)			
Date of Inspection: 8/6/12	Inspected by:	Maels.	And or who had the last time	Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? Tes No-(If No they need to be attached.)  - Storage not for Human Habitation or Sleeping  - If pressurited water enters structure get septic permits							
Signature of Inspector:				Date of Approval: 8/17/22			
Hold For Sanitary:   Hold For TBA:	Hold For Affi	davit: 🗆	Hold For Fees:				

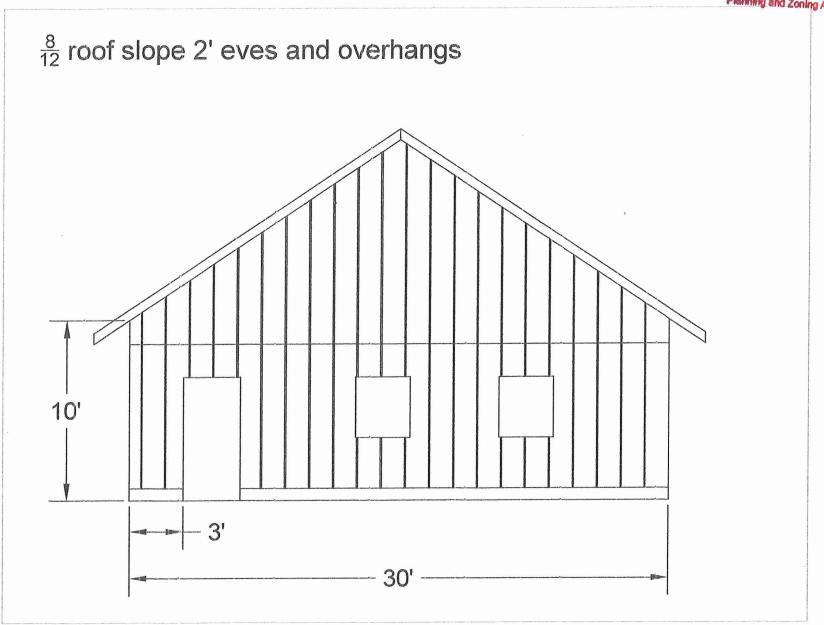


# Bayfield County, WI



JUL 19 2022

Bayfield Co. Planning and Zoning Agency

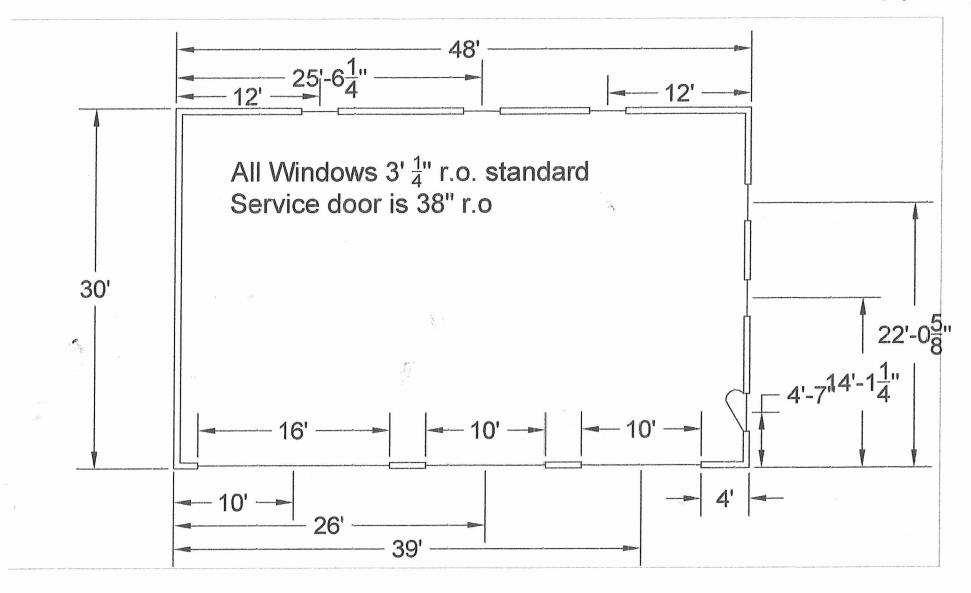


Flamming and Zoning Agency

6

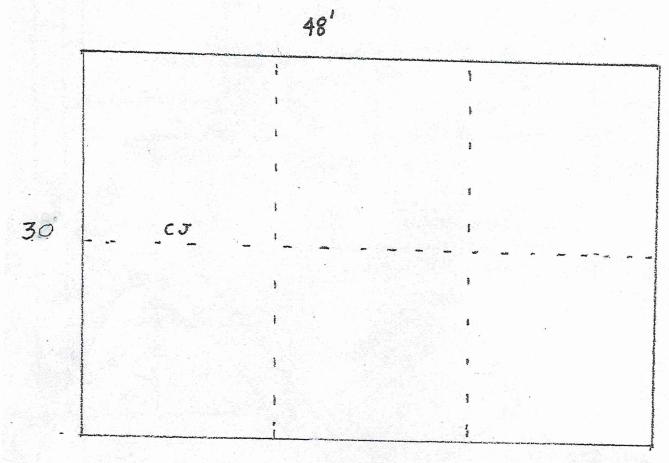
JUL 19 2022

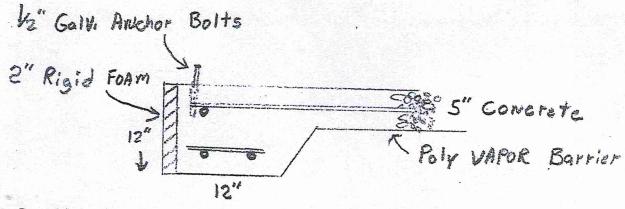
Bayfield Co.
Planning and Zoning Agency



JUL 19 2022

Bayfield Co.
Planning and Zoning Agency





#4 RE BAR Grid IN ENtire Slab
2 IN Bottom Cross Tied & Supported

Sections

**TOWN OF BARNES** 

PAYMENTS should reference: Tax ID: 2634

**DOCUMENT RECORDING**, or anything else should reference: 04-004-2-45-09-19-4 05-006-70000

Alternate/Legacy ID: 004-1172-04 000

Ownership: ALFRED ROGER & ELIZABETH ANN MANNIK REV TRUST

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information. Property Description / Location of Property

Site Address:

1990 KRENZ RD

ALFRED ROGER & ELIZABETH ANN MANNIK REV TRUST 8260 MANNIK RD **IRON RIVER WI 54847** 

986,526

33 O CO HWY N

**BANNES WI 54873** 

**Totals** 

First Dollar Credit

**Net Property Tax** 

Lottery & Gaming Credit

Phone: (715) 795-2782

Description: Sec 19 Tn 45 Rg 09 PAR IN LOT 6 IN V.945 P.796
WITH EASE V.769 P.291+) 1054A (ALFRED ROGER MANNIK & ELIZABETH ANN MANNIK REVOCABLE TRUST DT 3/24/2006)

Please include self-addressed, stamped envelope for return receipt.
Please inform your treasurer of any billing-address changes. Acreage: 0.000 Document: 2006R-507116 945-796 **Assessed Value Average Net Assessed Value** Real Estate Tax: Land **Improved** Total **Assessment Ratio** 2,278.70 Rate First Dollar Credit: (Does NOT reflect lottery -20.39\$101,000 \$134,500 Lottery Credit \$235,500 0.92671 or first dollar credit) -0.00 Net Real Estate Tax: 2,258.31 0.009676021 **Estimated Fair Market Value** Total Due: An "X" means unpaid School taxes reduced by 2,258.31 Land **Improved Total** prior year taxes. school levy tax credit. \$135.84 For full payment pay to TOWN OF BARNES \$109,000 \$145,100 treasurer by \$254,100 **Estimated State Aids** January 31, 2022 % Tax Allocated Tax District **Taxing Jurisdiction Net Tax Change** Warning If not paid by due dates, 2020 2021 2020 1,014.62 COUNTY 2021 125,995 installment option is lost and total tax is 135,560 TOWN OF BARNES 1,027.64 400,212 408,212 594.91 delinquent and subject to interest and if SCHL-DRUMMOND 614.43 3.3 198,600 208,048 571.63 TECHNICAL COLLEGE 555.07 -2.9 applicable, penalty. (See reverse) 261,719 278,026 89.16 81.56

Pay 2nd Installment Of:

1,129,15

0.4

4.9

0.0

by July 31, 2022

Amount enclosed:

1,029,846

**ALFRED ROGER & ELIZABETH ANN M** Tax ID: 2634 (004)

2,270.32

2,248.89

21.43

0.00

2,278.70

2,258.31

20.39

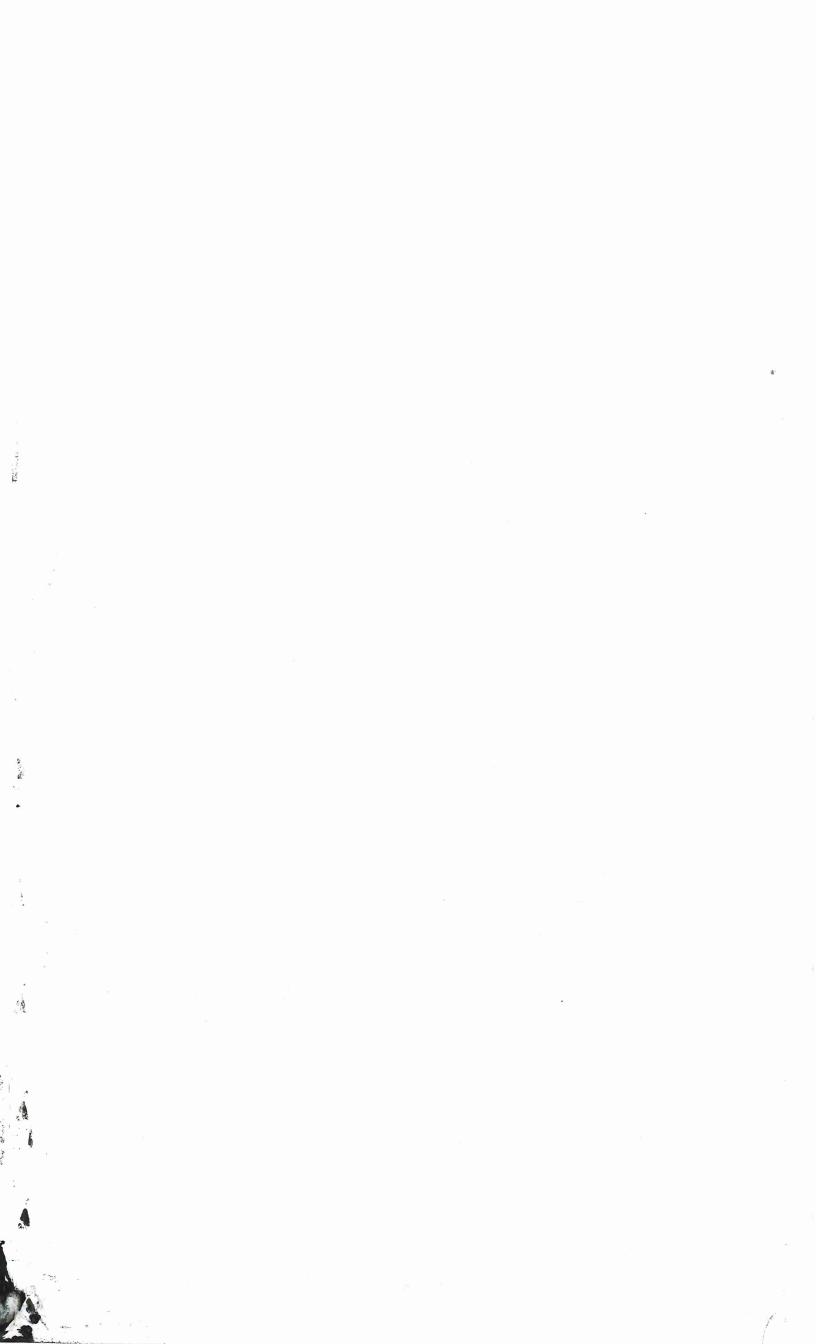
0.00

Make payment payable and mail to: BAYFIELD COUNTY TREASURER

JENNA GALLIGAN PO BOX 397

WASHBURN WI 54891

Include this stub with your payment



### Real Estate Bayfield County Property Listing

Today's Date: 8/11/2022

**Property Status: Current** 

Created On: 3/15/2006 1:14:48 PM

Description

Tax ID:

Updated: 1/22/2014 2634

PIN:

04-004-2-45-09-19-4 05-006-70000 004117204000

Legacy PIN:

Map ID:

Municipality:

(004) TOWN OF BARNES

STR:

S19 T45N R09W

Description:

PAR IN LOT 6 IN V.945 P.796 (TOG WITH EASE V.769 P.291+) 1054A (ALFRED ROGER MANNIK & ELIZABETH ANN MANNIK REVOCABLE TRUST DT

3/24/2006)

Recorded Acres:

3.347 Calculated Acres: 3.347 0

Lottery Claims: First Dollar:

Yes Zoning:

ESN:

(R-1) Residential-1

104

Updated: 3/15/2006
STATE
COUNTY
TOWN OF BARNES
SCHL-DRUMMOND
TECHNICAL COLLEGE

Recorded Documents QUIT CLAIM DEED

Date Recorded: 6/6/2006

2006R-507116 945-796

Updated: 8/17/2006

CONVERSION

Date Recorded: 3/15/2006

332-509

🎎 Ownership

Updated: 1/22/2014

**ALFRED ROGER & ELIZABETH ANN** MANNIK REV TRUST

IRON RIVER WI

**Billing Address:** 

ALFRED ROGER & ELIZABETH ALFRED ROGER & ELIZABETH **ANN MANNIK REV TRUST** 

8260 MANNIK RD IRON RIVER WI 54847 **Mailing Address:** 

ANN MANNIK REV TRUST

8260 MANNIK RD IRON RIVER WI 54847

Site Address \* indicates Private Road

1990 KRENZ RD \* **BARNES 54873** 

Property Assessment		Updated: 10/4/2016				
2022 Assessment Detail						
Code	Acres	Land	Imp.			
G1-RESIDENTIAL	3.300	101,000	134,500			
2-Year Comparison	2021	2022	Change			
Land:	101,000	101,000	0.0%			
Improved:	134,500	134,500	0.0%			
Total:	235,500	235,500	0.0%			



N/A

# Town, City, Village, State or Federal Permits May Also Be Required

completed or if any prohibitory conditions are violated.

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0189	Issued To:	ALFRE	D & ELIZA	BETH	MANNIK					
	PAR IN LOT	6 IN V.945 P.7	796								
Locatio	on: 1⁄4	of	1/4	Section	19	Township	45	N.	Range	9	W.
	Town of Barı	nes									
		:							đ		
Gov't Lo	ot Lo	Block	Si	ubdivisio	on			CSM#			
	tion(s): Not for Hu	equired prior	on or Sle	eping Purp neet and m	oses. aintair	If Pressuriz	ed wa	iter e	enters strue	d overh	nangs.
modification of	f construction that violates the law or oth	ner penalties or costs. For mor	re information, visit t	he department of natura	al resources we	tlands identification web	page or conta	act a depar	tment of natural reso	ources service o	enter (715) 685-2900.
NOTE:	This permit expires one	- 15	issuance if tl	ne authorized o	onstructi	on		Tr	acy Pool	er, AZ	4
	work or land use has no	ot begun.						Au	thorized Iss	suing Of	ficial
	Changes in plans or spe This permit may be voice										
	to have been misrepres							8-	22-2022		
	This permit may be voice	d or revoked if any	performance	conditions are	not				Date		

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

#### **APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN**

### Date Stamp (Received)

AUG 0 2 2022

Bayfield Co.

Permit #: Date: Amount Paid: Other:

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made p						Planning at D APPLICANT.		0.4	, on og	ication <u>N</u>	MUST be		ted F	ILL OUT	IN INK	(NO P	ENCIL)
TYPE OF PERMIT F	REQUESTED	) +>	X LANE	O USF	SANITA	ARY   PRIV				ONAL US		PECIAL	A1				Little,
Owner's Name:		,	,	002		g Address:		CON	וווטו		ity/State	The same of the sa	USE []	B.O.A.	TO 🗆	HER	<u> </u>
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2865 K	y:	D.	/		Cit	ty/State/Zip:					,					Cell Phone	۵٠.
Email: Inrint clear	1,1				5	GIATS.	WI	ح	) >	873							71-1831
diane. nel	Son. 5	200	mail.	com													
Contractor:		·			Contra	actor Phone:		PI	umbe	er:					P	lumber F	hone:
Authorized Agent:	(Person Signi	ng Applic	ation on behal	f of	Agent	Phone:		Δ	ant I	Mailing Ac	Idrace (inc	ludo Citu	/State/Zip	1.			
Owner(s))		0 11			, igoint			7	,ciic i	viailing At	iui ess (iii)	idde City	/State/Zip	):			uthorization (for Agent)
PROJECT	and Bassa		// T 0:		<u>Ta</u>	x ID#							Recorde	ed Docume	ent: (Sho		
LOCATION	egai Descri	ption:	(Use Tax Sta	tement)		1453	_						10/1	1/201	8		
PAR 1/4,	1/4	Gov	't Lot	Lot(s)	CSM	Vol & Page	CSM	Doc#	W.	Lot(s)	# В	lock #	Subdivis	sion:			
<u></u>																	
Section <u>05</u>	_ , Townshi	ip <u>44</u>	N, Ran	ge <u>09</u>	w	Town of	RN	ES					Lot Size			Acreag	e
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XShoreland -	-					yescontinu		-	_			11 = 32	feet		loodpla Zone?	iin	Present?
	Als Prop	Jerty/La	and Within 1	luuu teet ot	Lake, Po	ond or Flowag	e • —>		Dista	ance Stru 2	cture is f 70	rom Sho	reline : feet		Yes	100	□ Yes ※ No
□ Non-				-				-1							X No		KINO
Shoreland																	
Value at Time	KWESTANIE.								(AC)		24						
of Completion	E-									tal # of				Type of			Type of
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donated time & material				# 01 30	ories	Founda	LIOH		pr	on operty				the property <u>or</u> on the property?			
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\$20,000,00	Addit Addit	ion/Ai	teration	Loft		□ Foundation □ 2						\X'			Well		
+90,000,	☐ Conve	ersion		☐ 2-Stc	rv	Slab Slab			П	3		■ Sanitary (Exists) Specify Type:					
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			Dain sin si	C	/C:	Latin market					Wild Color	A 17. 16.			10115		Footage
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G			Resident	with Lo		illig Stiack, et	C.)						1	X		)	
Residentia	ıı Use			with a									1	X		)	
				with (2	nd) Por	ch							(	X		)	_
				with a	Deck								(	X		)	
☐ Commerci	al Use			with (2	nd) Dec	k					1		(	Х		)	
			ı			l Garage					m. I		· ( )	Х		)	
	-					or $\square$ sleeping							es) (	Х		)	
			Mobile F	lome (man	ufacture	ed date)		L.,		MT WV	A Sec. 1		_ (	Х		)	
☐ Municipal	Use		Addition	/Alteratio	<b>n</b> (expla	in)	A'		14				. (	Х		)	
-			Accessor	y Building	(explain	n)		71		Tree or			(	X	-1. 7	)	
·		×	Accessor	y Building	Addition	on/Alteratio	n (expl	lain) _	Яe	bull	( 941	age	_ (3	24 x €	22	1 5	28
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C-F				xplain)					7.1	5.7			-(	Х	3	)	
بالمبر إبالمبر			FAILURE TO	OBTAIN A PI	ERMIT or	STARTING CONS	TRUCTIO	ON WIT	HOU	T A PERMI	T WILL RES	JLT IN PE	NALTIES	0	11/1		
I (we) declare that this (are) responsible for t	s application (in	ncluding a	ny accompanyir	ng information)	has been e	xamined by me (us	and to th	he hest	of my	(our) knowle	dge and hal	of it is true	correct and	complete. I	(we) ackr	nowledge th	at I (we) am
result of Bayfield Cou property at any reaso	nty relying on	this inform	nation i (we) an	n (are) providin	g in or with	this application. I	we) cons	ent to d	ounty	officials cha	rged with ad	ministering	county ordi	nances to ha	ve access	to the abov	re described
Owner(s):	,					1.52				Same of	10 h		3.45.54	n	S		
(If there are Mu					must sign	n or letter(s) of	authori	zation	must	accompa	ny this an	olication		ate <u>Ad</u>	90	1,00	odd
						(5) 51	J 7 35		1		, and ab		1967	and the first	-		

Authorized Agent: (See Note below) Date (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1) Show Location of: (2) Show / Indicate:

**Proposed Construction** 

(3)Show Location of (\*): North (N) on Plot Plan

Fill Out in Ink - NO PENCIL

(4)Show: (\*) Driveway and (\*) Frontage Road (Name Frontage Road)

Show: (5)Show any (\*): (6)

All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond

(7) Show any (\*): (\*) Wetlands; or (\*) Slopes over 20%

SEE ATTACKED

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements			Description	Setba Measurer	
Setback from the Centerline of Platted Road	92	Feet		Setback from the Lake (ordinary high-water mark)	370	Feet
Setback from the Established Right-of-Way		Feet		Setback from the River, Stream, Creek		Feet
				Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	69	Feet				
Setback from the <b>South</b> Lot Line	310	Feet	Y- 1	Setback from Wetland		Feet
Setback from the West Lot Line	46	Feet		20% Slope Area on the property	☐ Yes	□ No
Setback from the <b>East</b> Lot Line	36	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank		Feet		Setback to <b>Well</b>		Feet
Setback to <b>Drain Field</b>		Feet				
Setback to Privy (Portable, Composting)		Feet				

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be narked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	#	# of bedrooms:	Sanitary Date:				
Permit Denied (Date):	Reason for Denial:							
Permit #:	Permit Date:							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Record) (Fused/Contigue)	ous Lot(s))	Mitigation Required Mitigation Attached		Affidavit Required Yes No Yes No				
Granted by Variance (B.O.A.)  ☐ Yes ☑ No Case #:		Previously Granted by  Yes No	Variance (B.O.A.)  Case	#:				
Was Parcel Legally Created Was Proposed Building Site Delineated  ✓ Yes □ No		Were Property Line	□ Yes □ No □ Yes □ No					
Inspection Record: Replace 48		1		Zoning District $(R-3)$ Lakes Classification $(2)$				
Date of Inspection: 8/2/22	Inspected by:	1/		Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attac	ched?   Yes   No - (If !	No they need to be attach	ched.)					
-Storage not for Human Ha	bitation or 5	ceping	11	1 5				
-Storage not for Human Ha -If pressurised water en	ters struc	ture get	Needed Soft	ic germits				
Signature of Inspector:	Mole	AL CONTRACTOR IN THE	<b>加加</b> 加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加加	Date of Approval: 8/15/22				
Hold For Sanitary:  Hold For TBA:	Hold For Affid	lavit: 🗌	Hold For Fees: 🗌					

-N-

## Bayfield County, WI



\$100

#### Bayfield County Impervious Surface Calculations

These calculations are **REQUIRED** per WI Admin Code NR 115.05(1)(e) and Section 13-1-32(g) and 13-1-40(h) of the Bayfield County Code of Ordinances. The undersigned hereby makes application for construction, reconstruction, expansion, replacement or relocation of any impervious surface within 300 feet of the ordinary high water mark and agrees that all activities shall be in accordance with the requirements of the Bayfield County Code of Ordinances and all other applicable ordinances and the laws of the State of Wisconsin.

Pursuant to Chapter 1, Title 13, Section 13-1-106(d) of the Bayfield County Zoning Ordinance(s), Planning and Zoning Department employees assigned to inspect properties shall have access to said properties to make inspections.

Property (	Owner(s):									
Dias	ie m Nelsor	_								
Mailing Ad	ddress:	Prope	erty Address	141	2/	R	-0 /	UI 548	272	
10518	W DESERT FOR	28	65 K	acte	e Kd	Darn	es, u	OL 396	75	
Legal Des	scription:	Section	on, Township	o, Range						
	1/4,	Sec <u>05</u> Township <u>44</u> N, Range <u>09</u> W							<u>9</u> w	
Authorize	d Agent/Contractor			Gov't Lot	Lot 7	#	CSM#		Vol & Page	1961
Lot(s)#	Block(s) #	Subdivision				Town o	f:		25.	, .,
	-					Bai	nes			
Parcel ID	# (PIN #)			Tax ID#		Date:				
04-				145	5	Au	7 9	20	22	
						\ 1				

**Impervious Surface:** An area that releases as runoff all or a majority of the precipitation that falls on it. "Impervious surface" excludes frozen soil but includes rooftops, sidewalks, driveways, parking lots and streets unless specifically designed, constructed and maintained to be pervious.

**Calculation of Impervious Surface:** Percentage of impervious surface shall be calculated by dividing the surface area of existing and proposed impervious surfaces on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark by the total surface area of the lot or parcel, multiplied by 100.

**Impervious Surface Standard:** Allow up to 15% impervious surface but not more than 30% impervious surface on the portion of a lot or parcel that is within 300 feet of the ordinary high water mark. A permit can be issued for development that exceeds 15% impervious surface but not more than 30% impervious surfaces with a mitigation plan that meets the requirements of the Bayfield County Ordinance(s).

- Existing Impervious Surfaces: For existing impervious surfaces that were lawfully placed when constructed but that do not comply with the standards in Section(s) 13-1-32(g) and Section 13-1-40(h), the property owner may do any of the following:
  - a. Maintenance and repair of all impervious surfaces:
  - b. Replacement of existing impervious surfaces with similar surfaces within the existing building footprint;
  - c. Relocation or modification of existing impervious surfaces with similar or different impervious surfaces, provided that the relocation or modification does not result in an increase in the percentage that existed on the effective date of the county shoreland ordinance, and meets the applicable setback requirements in Section 13-1-32.

1

		0.0
Impervious	CILIPTOO	14000
IIIIDEI VIOUS	Surface	Helli

#### Dimension

Area (Square Footage)

		Stormwater Management Plan Required:  Ves No								
and the Bernardia of agent States and a recitive	AS TONE (CASE OF SET SEASONS) IN A STREET	Zoning District (R3) Lakes Classification (2)								
Issuance Information (County Use Only)	ne septembro in communica modificanti fluidina	Date of Inspection:								
Total square footage of additional im	pervious surface allowed: @ 15%	<u> </u>								
If the proposed impervious su	rface area is greater than 15% mitigati	on is required.								
c. Percentage of impervious sur	face area: 100 x (b)/a =	90								
b. Total impervious surface area	a: <u>4906</u>									
a. Total square footage of lot: _	67000									
Total:		4966								
The second secon										
Proposed Other Structures										
Proposed Driveway										
Proposed Covered Porch(es) & Deck(s)										
Proposed Sidewalk(s) & Patio(s)										
Proposed Accessory Building/Garage	24122	528								
Proposed Addition/House										
Existing Covered Porch(es), Driveway & Other Structures	15X 20 Parking LOT 90XII Driveway 90XIG Pad	2736								
Existing Sidewalk(s), Patio(s) & Deck(s)	46x4 Sidewark 66x5 16x9 Deck walkway	658								
Existing Accessory Building/Garage	24122	528 to be replaced								
Existing House	30×33	990								

u/forms/impervioussurface Created: May 2012 (®Apr 2016; Sept 2020)

Signature of Inspector:

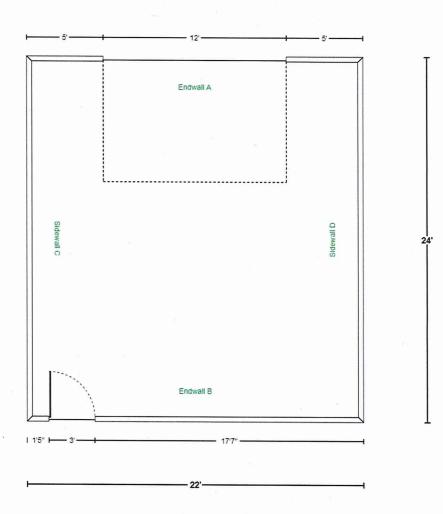
Proofed by: \_\_\_\_\_

Date of Approval:

Date: 7/05/2022 - 9:10 AM Design ID: 307454340316 Estimate ID: 50772

Estimated Price: \$10,677.06





#### **Estimated Price: \$10,677.06**

<sup>\*</sup>Today's estimated price. Future pricing may go up or down. Tax, labor, and delivery not included.

<sup>\*</sup> Today's estimated price, future pricing may go up or down. Tax, labor, and delivery not included.

Date: 7/05/2022 - 9:10 AM Design ID: 307454340316 Estimate ID: 50772

Estimated Price: \$10,677.06

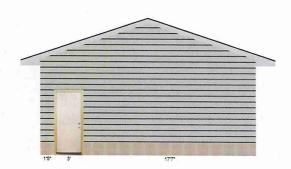
\*Today's estimated price. Future pricing may go up or down. Tax, labor, and delivery not included.



#### **Dimensions**

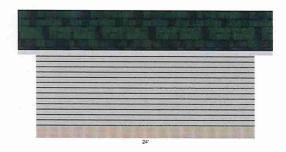
## **Wall Configurations**

\*Illustration may not depict all options selected.

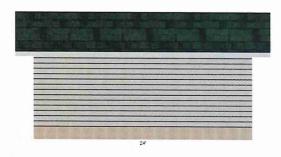


ENDWALL B

Mastercraft® 36"W x 80"H Primed Steel 6-Panel



SIDEWALL D



SIDEWALL C



ENDWALL A

Ideal Door® Commercial 12' x 8' White Non-Insulated Garage Door

<sup>\*</sup>Some items like wainscot, gutter, gable accents, are not displayed if selected.

For other design systems search "Design & Buy" on Menards.com

**TOWN OF BARNES TREASURER** 

STATE OF WISCONSIN - BAYFIELD COUNTY **REAL ESTATE PROPERTY TAX BILL FOR 2021** 

DIANE M NELSON **TOWN OF BARNES** 

1,237.56

JUDY BOURASSA

3360 CO HWY N

**Assessed Value** 

Totals

First Dollar Credit

**Net Property Tax** 

Lottery & Gaming Credit

<u>Land</u>

**BARNES WI 54873** 

Phone: (715) 795-2782

PAYMENTS should reference: Tax ID: 1455

**DOCUMENT RECORDING,** or anything Else should reference:

PIN: 04-004-2-44-09-05-1 05-001-08000

Alternate/Legacy ID: 004-1063-07 000

Ownership: DIANE M NELSON

**Important:** Be sure this covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

**Property Description / Location of Property** 

**Site Address:** 

Acreage: 1.541

2865 WALTER RD

Description: Sec 05 Tn 44 Rg 09 PAR IN GOVT LOT 1 IN DOC 2020R-584961 428E

**DIANE M NELSON** 10518 WEST DESERT CIR SUN CITY AZ 85351

Please include self-addressed, stamped envelope for return receipt. Please inform your treasurer of any billing address changes.

**Improved** 

Document: 2020R-584961 **Net Assessed Value** Real Estate Tax: First Dollar Credit: **Assessment Ratio** Rate (Does NOT reflect lottery Lottery Credit: or first dollar credit) Net Real Estate Tax: Total Due:

\$127,900 0.92671 \$72,800 \$55,100 0.009676021 **Estimated Fair Market Value** An "X" means unpaid School taxes reduced by prior year taxes. school levy tax credit. <u>Land</u> <u>Improved</u> Total \$73.78 **\$78 600** ¢50 500 ¢138 100

Total

Average

\$70 <b>,</b> 000	\$39,300	\$130,100				
			% Tax			
	<u>A</u>	llocated Tax	x District	<u>Ne</u>	t Tax	<u>Change</u>
Taxing Jurisdiction		<u>2020</u>	<u> 2021</u>	<u> 202</u>	<u>0 2021</u>	
COUNTY		125,995	135,560	551.0	4 558.11	1.3
TOWN OF BARNES		400,212	408,212	323.1	0 333.70	3.3
SCHL-DRUMMOND		198,600	208,048	310.4	5 301.45	-2.9
TECHNICAL COLLEGE		261,719	278,026	48.4	2 44.30	-8.5

986,526

1,029,846

1,233.01

21.43

-20.39 -0.00 1,217.17

1,217.17

For full payment pay to TOWN OF BARNES treasurer by January 31, 2022

#### **Warning**

If not paid by due dates, installment option is lost and total tax is delinquent and subject to interest and if applicable, penalty. (See reverse)

-4.9

1,237,56

20.39

7/19/22, 12:30 PM Real Estate Tax Bill

Pay **1st** Installment Of: Or Pay **Full** Payment Of:

608.59 1,217.17

by January 31, 2022

Amount enclosed:

DIANE M NELSON Tax ID: 1455 (004)

Make payment payable and mail to: TOWN OF BARNES TREASURER JUDY BOURASSA

3360 CO HWY N BARNES WI 54873

Include this stub with your payment

Or to Pay Online see *Credit*Card Payments on back

Pay 2nd Installment Of:

608.58

by July 31, 2022

Amount enclosed:

DIANE M NELSON Tax ID: 1455 (004)

Make payment payable and mail to: **BAYFIELD COUNTY TREASURER** 

JENNA GALLIGAN PO BOX 397

WASHBURN WI 54891

Include this stub with your payment

# Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

# BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0205	Issu	ed To:	DIANE I	VI NELSON	l						£.	
Locatio	on: Town of	½ of <b>barnes</b>		1/4	Section	5	Township	44	N.	Range	9	W.	
Gov't Lo	ot 1	Lot		Block	Sı	ubdivisi	on			CSM#			
	ential Structu cessory: [ 1-	Story ]; gara	<u>age</u> (22	2' x 24') ]	Height of		, would require a	dditiona	ıl perm	nitting.			
You are respon	tion(s): Not for perm  usible for complying with state of construction that violates the	it is required	d prior	r. Must m	eet and mades, lakes, and streams.	aintai Wetlands tha	n setbacks in	nclud	ing e	eaves and	over	hangs. nay result in removal or	
NOTE:	This permit expi work or land use	res one year fron e has not begun.	n date of	issuance if th	e authorized c	onstruct	ion	Tracy Pooler, AZA  Authorized Issuing Official					
Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.										22-2022			
		be void or revok		•	conditions are	not				Date			